



Patient Forms

## Patient/Email Communication

It is important to note that email and text communication is not always secure. Email messages can be intercepted and for this reason, Smiles Dentistry does not communicate personal health information through this method. Smiles Dentistry will never ask for your account information, credit card numbers, or personal information via email. If you think you may have received a suspicious email from us, please contact our office immediately at (561) 844-0715.

By enrolling in Email Appointment Confirmations, you may receive non-appointment related emails throughout the course of your subscription with Smiles Dentistry. Emails may include special offers or alerts notifying you about important office news and events.

**We promise that we will not spam your account with unnecessary emails,  
nor will we sell your information to a third party.**

You may opt out of receiving emails at any time by calling our office at: (561) 844-0715

Patient Name: \_\_\_\_\_

Additional Family Members (under 18 years old):

---

DOB: \_\_\_\_\_

Email Address: \_\_\_\_\_

Patient Signature: \_\_\_\_\_

Thank you!

**Sharada Kacham**

Smiles Dentistry

drkacham@smilescometrue.com

4600 Military Trail, Suite 219

(561) 844-0715