



Communications Update Form

“Communication is the Key.” We’ve all heard that, but in our practice, communication is critical in taking excellent care of you and your family. In the interest of making sure we are doing the right things right, please take a moment to update your information. Thank you for helping us help you.

Name: _____

Email: _____

Cell phone: _____

Have there been any changes to your insurance benefits? (For example, child turning of age, divorce, deceased members, etc associated with account)
YES NO

What is your preferred method of contacting you? Please indicate your 1st, 2nd and 3rd preferred method: Home__Work__Cell __Email __Text __

Please check if you would like to receive future confirmation reminders for upcoming appointments by: Email__Text__ or Both__

If an appointment becomes available for the highly sought after 7:00AM or 4:00PM appointments would you like to be contacted? YES NO

Are there other better times for you? _____

In the event we have a last minute opening, would you like to be put on an ASAP list? YES NO

Please sign and date: _____

Nikki Christian & Wesley Christian
DENTISTRY
