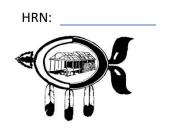


Kickapoo Tribal Health Center

105365 S. Hwy. 102 P.O. Box 720 McLoud, OK 74851



APPOINTMENT REMINDER MESSAGES OPT IN / OPT OUT

•	ive your appointment re out, please complete th	_	receive your reminder via text
Name:			
Date of Birth:		Last 4 of Social:	
Cell phone number	r (with area code):		
Please be advised, phone call remind		nessage appointment reminde	r, you will not or no longer receive a
**THERE IS NO		SERVICE, BUT STANDARD JR CARRIER MAY APPLY*	TEXT MESSAGING RATES FROM
(Opt In)	I would like to rec	eive my appointment r	eminder as a text message.
l l`'	t) I am currently re all instead.	eceiving text reminders	and I wish to receive a
appointments pleas well as complet	ase ensure your name ar ion of a separate Appoi r	nd current cell phone number Intment Reminder Messages f	essage reminder for your child's are listed in your child's patient record orm with the parent's cell phone acy. All HIPAA and Privacy policies
Signature of Patient	or Parent/Guardian	 Relationship	 Date