

EMAIL CONSENT

Dear Valued Patient,

Foothills Dermatology and Facial Plastic Surgery is pleased to announce to you that we are offering a newsletter and specials via email. These publications include exciting new information as well as promotional specials. If you would like to receive these newsletters, please indicate your e-mail address on the line below. Providing your e-mail address allows permission to email you the newsletter/specials regarding Foothills Dermatology and Facial Plastic Surgery.

If you are the parent or legal guardian and would like to receive our e-mail specials, please include **your** name and e-mail below.

Name: _____

Please include your birth month and day to receive our specials: _____

E-mail address: _____

Signature: _____ Date: _____