

Bay Physical Therapy and Sports Rehabilitation Center, Inc. dba

Bay Physical Therapy and Fitness Center

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APPOINTMENT REMINDERS

- ☐ 1. Yes, I would like to receive appointment reminders. Please send via: choose one

Text at: _____

Call at: _____

Email at: _____

- ☐ 2. No, I would not like to receive appointment reminders.

Bay Physical Therapy will never sell or share your email address or any other personal information. I understand the options presented to me above.

Print Name: _____

Signature: _____ Date: _____