

Contact Preference Form

Wheatfield Family Chiropractic is pleased to announce that we can now offer appointment reminders via phone call, email or text. Please fill out all of the following information and indicate your preferred method of contact. If you choose Cell phone we do need your carrier. If you prefer that we do not contact you regarding your appointment indicate by checking no reminder.

PRINT NAME _____

___ NO REMINDER

___ Home Phone (call) _____

___ Work (call) _____

___ Cell Phone (text) _____ *** (Cell CARRIER) _____

___ Cell Phone (call) _____ *** (Cell CARRIER) _____

___ Home Email _____

___ Work Email _____

Signature: _____ Date: _____