

MIR NEUROLOGY & SPINE CENTER

Consent to Receive Email Correspondence from the Mir Neurology Website

Name _____ Date: _____

Email: _____ Date of Birth: _____

Mir Neurology & Spine Center offers our patients the opportunity to sign up through MirNeurology.com and receive practice correspondence by email.

Benefits from joining the MirNeurology.com website:

- Receive email updates regarding our office
- Stay updated with our informative newsletter
- Access to our informative blog
- Staying updated with the latest tips and information for your neurology care needs
- Website is managed by a security scanning system

Disclosure: Communication by email may be stored in electronic files. Please do not respond to any emails, always contact the practice by telephone or face-to-face. In a medical emergency, please do not use email. Call the emergency services or go to an urgent care of hospital facility. Please contact our practice with any additional questions or concerns.

Signature: _____ Witness: _____