

**Nancy C. Wheeler, M.D., P.A.**  
133 Defense Highway, Suite 114  
Annapolis MD 21401  
410-266-9181

**Express Written Consent to Receive Text Messages**

I agree to receive SMS messages regarding appointments, and this agreement isn't a condition of any purchase. I understand that I can opt out of this service at any time by notifying the Office Manager at 410-266-9181. Data and message rates may apply. I understand that this text service will not be used for any communication other than to receive an appointment reminder and no reply will be accepted. To change, cancel, or reschedule an appointment, I agree to contact the office by phone at 410-266-9181.

This agreement will remain in force until and unless I opt out of this service by notifying the Office Manager.

Phone Number: \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Note:** Your first message will be a confirmation of your agreement to receive text reminders. You must reply to this first text message giving your consent. Following the first text message, we will not accept any replies via text.