

**SERENE FAMILY DENTISTRY
ACKNOWLEDGEMENT OF RECEIPT
OF
THE NOTICE OF PRIVACY PRACTICES**

The notice of Privacy Practices provides information about how we may use and disclose protected health information about you. In an effort to be environmentally green, our office has the notice of Privacy Practices posted to be viewed by our patients. Current copies are also available online by accessing our website at www.serenefamilydentistry.com. Please select one of the following.

I acknowledge that I have received a paper copy of the Notice of Privacy Practices.

I acknowledge that I have reviewed the posted Notice of Privacy Practices and decline a paper copy.

Signature of Patient or Patient's Representative

Date

Print Name

Relationship to Patient