



3. What has pleased you most in your course of treatment at our practice?

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4. Additional notes/comments:

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Please read and sign the Testimonial Release Consent form on the following page.

Thank you!

Patient Testimonial Release Consent

Purpose of Consent: By signing this form, you are hereby consenting to allow Kik Chiropractic to use and disclose the information in your testimonial and acknowledge that your testimonial may be distributed to the public, including but not limited too; social media.

Right to Revoke: You have the right to revoke this Release at any time by providing written notice of your revocation and submitting it to Kik Chiropractic.

CONSENT TO RELEASE

I hereby authorize Kik Chiropractic and staff to use my testimonial and any information contained herein in its public relations efforts. I understand and approve the disclosure of testimonial information to the media and other individuals and entities that may be involved in the public relations efforts of Kik Chiropractic. I acknowledge that the media may be interested in telling my story, and I am willing to cooperate and participate in media.

I understand that I am providing the testimonial information to Kik Chiropractic and that my treating healthcare provider will not be providing any protected information to the media or the public, including private health information in my medical records, the confidentiality of which may be protected by federal and state statutes and regulations, including the Health Insurance Portability and Accountability Act (HIPAA).

I waive the right of prior approval and hereby release Kik Chiropractic from any and all claims for damages of any kind based on the use of my testimonial or information in the testimonial. By signing below I agree and acknowledge that I have read and understood the above release and agree to all terms described. I am of legal age and freely sign this Consent to Release my Patient Testimonial.

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Signature      Date

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Print Name

Please provide your contact information:

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Address

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Phone      Email

Thank you for supporting Kik Chiropractic!