

Serenity Well-Being Clinic, P.A.

Comprehensive Podiatric Care

2701 Park Drive, Suite 6
Clearwater, Florida 33763
727-631-1592

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

I acknowledge that I was provided a copy of the Notice of Privacy Practices and that I have read (or had the opportunity to read if I so chose) and understood the Notice.

Patient Name (please print)

Date

Parent or Authorized Representative

Signature