



SING

ORTHODONTICS

1516 E. Palm Valley Blvd #C-1
Round Rock, TX- 78664

3313 Ranch Road 620 South #300
Lakeway, TX- 78738

HIPAA Acknowledgement

ACKNOWLEDGEMENT FORM

I have received the Notice of Privacy Practices and I have had an opportunity to review it.

Name: _____

Signature: _____

Date: ____/____/____