



Dr. Candice Wakulich- Family Dentistry

**CONSENT FORM FOR PROFESSIONAL TEETH WHITENING/BLEACHING**

This information is provided to give you insight into Professional Teeth Whitening/Bleaching. Your cooperation and understanding of this material is necessary as we strive to achieve the best results for you. The safety of Professional Teeth Whitening in general is very high. Like all professional health care there are limitations and risks, and absolute success is variable and cannot be guaranteed.

**AUTHORIZATION AND RELEASE FOR PROFESSIONAL TAKE-HOME TEETH BLEACHING**

I certify that I have thoroughly read and understand the above information. I understand the limitations and potential risks concerned with take home professional tooth bleaching.

Patient/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Witness Signature \_\_\_\_\_

Original Shade \_\_\_\_\_