



Consent for out of town Cosmetic Surgery Patients

I hereby agree to make myself available to return to Dr. Jeffrey C. Dawes' office in Calgary for the following required post – operative follow up visits: 1 weeks post operatively, 6 weeks post operatively, 3 months post operatively as well as any additional follow up deemed necessary by Dr. Dawes should any unforeseen complications arise.

Date

Print Name

Signature

Witness:

Date

Print Name

Signature