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Now you can receive instant **Text** and/or **Email** notification as soon as your prescription is ready.

Just fill out this form and return it to the store to begin using this free service!

TEXT NOTIFICATION

EMAIL NOTIFICATION

NAME: _____ DATE OF BIRTH: ____/____/____

CELL PHONE #: (_____) _____ (for text notification)

EMAIL: _____ (for email notification)

HOME ADDRESS: _____

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