



CONSENT TO COMMUNICATION BY EMAIL

Client Name: _____ Case # _____

Communication by e-mail:

- I consent to Southwestern sending me periodic information about my care by way of email.

My e-mail address is: _____

Southwestern will take every effort to insure that such electronic communications will contain minimal personal identifying information. But, I understand that Southwestern cannot guarantee the data security of email transmissions, and, as such, is not responsible if such information is intercepted by others.

Client Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____