



Consent for Electronic Communication

**You may refuse to sign this acknowledgement*

Occasionally it is helpful to communicate general information about the services my child receives at Advance Therapy through email. As I read in Advance Therapy's Notice of Privacy Practices, it is important to keep some guidelines in place when communicating through email.

I, (name) _____, parent/guardian of

(child's name) _____, am providing the following email address and will let Advance Therapy know of any changes to this address.

EMAIL ADDRESS: _____

- I will keep this email account secure. _____ (initials)
- I will not send identifying information (i.e. client names, etc) to staff at Advance Therapy in my communications.
When emailing I will keep the subject line general and will not use full names. _____ (initials)
- I will not attach reports (i.e. IEPs, etc) with identifying information when emailing to staff at Advance Therapy.
I know Advance Therapy is unable to email any clinic reports. _____ (initials)

Signature: _____ Today's Date: _____