Grace Gulf Breeze LLC

3000 Gulf Breeze Parkway Suite 11, Gulf Breeze FL 32563

Consent of Non-secure Forms of Electronic Communication

Electronic communication, via email and text, between you and your doctor - Dr.

Caroline Snowberger DO - may not be secure. By signing below, you are acknowledging that you realize that email and text communication does not provide a completely secure means of communication.

While your Physician will take reasonable efforts to protect your confidentiality, there is some risk that any protected health information contained in email or text may be disclosed to or intercepted by unauthorized third parties.

Your treatment will not depend on you giving consent. You also have the right to terminate this agreement at any time.

Use of more secure communications, such as phone or fax, are always an alternative that are available to you if you elect to not give consent to the following forms of communication.

Authorization

Date
Signature of Client Printed Name of Client
Email communication Yes () No ()
Text communication Yes () No ()
reminders, scheduling, or other relevant matters, and I understand the risks involved:
I give permission for my Physician to contact me using non-secure methods regarding