EMAIL CONSENT FORM

Participant Name: _____ Email Address: _____

Consent to Receive Communications Electronically:

I hereby consent to receive communications, disclosures, documents, and notices from [Company Name], its affiliates, and agents, in connection with my participation and relationship with [Company Name], by electronic means, including but not limited to email, mobile text messaging, and postings on websites.

Scope of Consent:

This consent applies to all communications related to my account, transactions, services, products, and other matters. I understand that this agreement applies to all future communications until I revoke my consent as described below.

Method of Delivery:

Communications may be sent to the email address I have provided or to any updated email address I subsequently provide. I understand that it is my responsibility to keep my email address current and to notify [Company Name] of any changes.

Right to Withdraw Consent:

I understand that I may withdraw my consent to receive electronic communications at any time by contacting [Company Name] at the contact information provided below. Withdrawal of consent will not affect the legal validity or enforceability of communications received prior to withdrawal.

Hardware and Software Requirements:

I represent that I have the necessary hardware and software to access and retain electronic communications, including a compatible device and internet connection. I understand that I may request paper copies of any electronic communications by contacting [Company Name].

Security and Privacy:

[Company Name] will use reasonable security measures to protect the confidentiality and integrity of electronic communications. However, I acknowledge that no method of electronic communication is completely secure and agree to assume that risk.

Acknowledgment and Agreement:

By signing below, I acknowledge that I have read, understood, and agree to the terms of this Electronic Communications Consent Form. I confirm that I am authorized to provide this consent for the account referenced herein.

Contact Information for Withdrawal or Paper Copies:

[Company Name]
Address: 1234 Main Street, Suite 500, City, State ZIP
Phone: (123) 456-7890
Email: support@companyname.com

PARTICIPANT'S SIGNATURE **DATE**

Signature: _____ _____