



CONSENT FOR EMAIL COMMUNICATION

This form provides important information about communicating with Kings View by email. Please read it carefully before deciding whether to give consent.

➤ **Purpose**

Kings View uses email to communicate with clients about certain limited matters. While Kings View takes reasonable precautions, email is not a secure method of communication. There are risks that you should understand before deciding whether to allow Kings View staff to contact you by email.

➤ **Risks of Email Communication**

- Emails could be intercepted during transmission.
- Emails may be misdirected, lost, or delayed.
- Email is not a substitute for treatment, therapy, or emergency services.
- Copies of emails may be kept by internet service providers, on personal devices, or in backup systems.
- Email communications are not automatically included in your medical record.

➤ **Permitted Uses of Email**

If you consent, Kings View staff may email you about:

- Scheduling and confirming appointments
- Billing questions
- Updating your contact information
- Sharing general program information (e.g., hours of operation, program notices)

Kings View will not use email for clinical treatment discussions, therapeutic interventions, or other “medical correspondence.”

➤ **Client Responsibilities**

If you choose to communicate with Kings View by email, you agree to:

- Provide and maintain a current email address;
- Notify Kings View promptly of any changes to your email address;
- Use reasonable safeguards (such as a private device with password protection) to protect your email account;
- Understand that Kings View may not respond immediately to emails. Email should not be used for urgent or emergency matters.

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ACKNOWLEDGEMENT AND CONSENT

I have read and understand the risks and limitations of email communication described above. I consent to Kings View communicating with me by email for the limited purposes described. I understand I may revoke this consent in writing at any time.

Client Information:

- Client Name:
- Client Record #:
- Client Email Address:

Signatures:

- Client / Legal Representative Signature: Date:
- Printed Name (if not client):
Relationship:
- Staff Witness Signature: