



I, _____ (patient's name) understand that the The SEED Center of Atlanta, Inc. email server does not encrypt emails. All email correspondence that I send and receive from The SEED Center will be transmitted through standard Internet service. By signing, I am authorizing The SEED Center to communicate with me via email.

Even though The SEED Center provides a secure platform for SEED Center providers to communicate, I give permission for all SEED Center providers to communicate via standard, non-encrypted email to discuss any issues related to my care, _____ (please print name),
_____ (date of birth).

_____ (signature)

_____ (name printed)

_____ (today's date)