



**Beltrami County Client Text Messaging and E-mail Consent Form**

**First Name**

**Last Name**

**Date of Birth**

AREP/Legal Guardian First Name (if applicable)

AREP/Legal Guardian Last Name (if applicable)

**Cell Phone Number**

**Cell Phone Provider**

**E-mail Address**

**The Purpose of this form is to allow Beltrami County to contact you via SMS Text Message and/or via E-mail.**

- I know that I am under no obligation to authorize the County to send me text messages and/or contact me via E-mail.
- I understand that message data rates may apply to messages sent initiated by the County under my cell phone plan and that I will be responsible for any data charges incurred on my device.
- I understand that text messages and E-mail are not a substitute for professional medical attention.
- I will keep the County informed of my up to date cell phone number and e-mail address. I will inform the County if I no longer have access to a cell phone number or e-mail address.
- I understand that my text messages and e-mails may be archived and reviewed and may be used as evidence in court if I am or become involved in a court proceeding.

**USE OF COUNTY'S ENCRYPTED TEXT MESSAGING AND/OR E-MAILING APP.** I understand the County will use reasonable means to protect the security and confidentiality of information sent and received. **However the County cannot guarantee the security of text and E-mail communications and is not liable for improper disclosure of private or confidential information that is not caused by the County's intentional misuse.**

**TERMINATION OF THE TEXT MESSAGING AND/OR E-MAIL RELATIONSHIP.** I may opt-out of receiving these communications at any time in writing to the County. The County shall have the right to immediately terminate the text messaging and/or E-mail relationship with you if determined in the County's discretion that 1) You have violated the terms and conditions set forth above or otherwise breached this agreement or 2) Have engaged in conduct which the County determines to be unacceptable or 3) The County no longer wishes to utilize text messages and/or video conferencing to communicate with its clients.

**CLIENT ACKNOWLEDGEMENT & AGREEMENT.** I have discussed with the County and acknowledge that I have read and fully understand this consent form. I understand the risks associated with the communication of text messages and e-mailing between the County and me.

**Declaration of Consent**

By checking this box, I consent to permit Beltrami County to contact me by text message and/or E-mail.

**Signature**

**Date**