



PRIVACY, RIGHTS, AND PRACTICE DOCUMENT

(Revised for 09/01/2023)

PRIVACY POLICY

I have been given electronic access to the privacy policy and my rights, the opportunity to review it, ask questions, and consent to the terms.

I also consent to receive email and text communication about my child's speech services, including progress in therapy and evaluation reports, understanding that the email and phone are not encrypted as described in the privacy policy.

I acknowledge I can request a change in consent at any time by notifying my speech therapist and completing the SPECIFIC DENIALS FORM and submitting it to her.

Legal Guardian Signature

Date