
CONSENT FOR USE OF EMAIL AND TEXT COMMUNICATIONS

I am consenting to email and text communications between myself and the Samaritan Counseling Center, with the following understanding:

Potential Risks:

- Information transmitted may not be sufficient for a clear understanding between parties.
- Unencrypted email or text communication is **not** a HIPAA compliant form of communication. The Samaritan Counseling Center does not have encryption capabilities to maintain the procedures and protocols necessary for secure communication via email or text. There may be issues beyond the control of the Samaritan Counseling Center that could cause a breach of privacy of your confidential information. With your signature, you are affirming that you understand and are agreeing that the Center cannot guarantee any safety of the information that is discussed with you over these types of communication.
- Under no circumstances can the Samaritan Counseling Center guarantee that any email or text communication will be confidential.

I understand that the following alternatives are available to me:

- A face-to-face appointment with the clinician.
- Communication via telephone.
- Secure communication with your clinician via your client portal.

I understand that I have the right to revoke this Consent, in writing, at any time, except to the extent that the Samaritan Counseling Center has acted in reliance hereon.

By my signature below, I understand that any communication via email or texting is not secure and that the Samaritan Counseling Center does not guarantee the privacy of any communication via these types of communication.

Client Name (Print): _____

Client Signature (or person authorized to sign for Client): _____

If authorized signer, relationship to Client: _____

Date: _____