

**Firstfruits Nutrition
Nutrition Counseling & Health Coaching**

Acknowledgment of Receipt of Privacy Notice

I, _____, have received a copy of Firstfruits Nutrition's HIPAA Privacy Notice.
*You may refuse to sign this acknowledgment

Signature

Date

Electronic Signature Agreement: Signatory must be 18 years of age or older, and agrees that this Agreement may be executed and delivered by electronic signatures and that the signatures appearing on this Agreement are the same as handwritten signatures for the purposes of validity, enforceability and admissibility.