

## **Client Consent for Use and Disclosure of Health and Personal Information**

### **Elite Skin & Body**

35815 county road 31, Eaton, Colorado, 80615

Eliteskin101@gmail.com | 720-662-5595

This form is intended to comply with the Health Insurance Portability and Accountability Act (HIPAA), although esthetic services are not classified as medical care. This notice is a best practice for maintaining client confidentiality and transparency.

I understand and agree to the following:

#### **1. Purpose of Information:**

Information collected during intake, services, and consultations may include health history, skin concerns, and lifestyle details. This is used solely to provide appropriate and customized treatments.

#### **2. Use and Disclosure:**

My personal and health information may be used for:

- Treatment planning and progress tracking
- Internal record-keeping
- Communication regarding appointments or follow-up services

#### **3. Confidentiality:**

My information will not be shared with any third parties without my written consent unless required by law.

#### **4. Right to Access:**

I have the right to request to see or receive copies of any personal information stored by Elite Skin & Body.

#### **5. Revocation:**

I understand that I may revoke this consent in writing at any time, except to the extent that action has already been taken.

Client Signature: \_\_\_\_\_

Date: \_\_\_\_\_