

Consent to Communications

Employee Name:			
Positio	on:	Department:	
	I consent to CPRD text messaging me for all facility/programming weather, disaster, and		
	I I DO NOT consent to CPRD text messaging r facility/programming weather, disaster, and	-	
Employ	oyee Signature:	Date:	
Phone	e Number:		
	I consent to my phone number being used i not limited to, scheduling matters and facili	in a work-related group chat for alerts including, lity/programming information. y voluntary, <i>not</i> mandatory, and I can revoke con	
	• •	ing used in a work-related group chat for alerts atters and facility/programming information.	
Employee Signature:		Date:	
Phone	e Number:		