



IMPORTANT - PLEASE READ!



HealthCraft^{TM/MC}

Dear Valued Client,

We at HealthCraft Products Inc, are committed to providing excellent customer service. One of the ways that we can do this is to contact you by facsimile and email with product announcements, promotions, special events, and exciting news. We ask for your consent so that we may send you these announcements by facsimile and email. Please complete the information, sign, and return the consent by facsimile.

Name of company:

Name and title / position of person authorized to provide such consent:

Fax number (s) for which consent is being provided:

Email address (s) for which consent is being provided:

Preference for receiving announcements: Facsimile Email

I understand that by providing the information above and signing this form on behalf of the company / organization, I have provided authorized consent to receive communications sent via facsimile and / or email by, or on behalf of HealthCraft Products Inc.

Signature _____ **Date:** _____

PLEASE SIGN AND RETURN TO 613-822-1886