

LIABILITY WAIVER

I request that you send my tax returns and related financial information to me electronically without encryption and password protection. I understand that doing so exposes me to identity theft and could reveal my full name, address, birthdate, Social Insurance Number and financial information to identity thieves who have the ability to intercept emails and other forms of unencrypted data transfer.

I hereby agree to give up the right to sue Horizon Professional Accountants Ltd. for any injury or damages as a result of these electronic data transfers.

Signature _____

Name _____

Date _____