

Acknowledgement, Agreement and Consent

- The personal data so obtained from the Patient is further processed or disclosed to third parties as required or permitted by law. Pursuant to Section 7 of Personal Data Protection Act (PDPA) 2010, a copy of the written notice which includes the purpose for which the Patient's personal data and sensitive personal data is collected/processed and classes of third parties to whom THKD will/may disclose the Patient's personal data to is available upon request, or please log onto our website at www.thomsonhospitals.com to view it online.
- I / We hereby give consent to THKD to collect/process the Patient's personal data and sensitive data (including health information and religious beliefs) in accordance with the written notice.
- Please tick 'v' where applicable:
 - I/We would like to receive direct marketing from THKD including future events, promotions, updates and any other marketing activities.
 - I/We would like to receive direct marketing from other companies being THKD's selected business partners directly or indirectly related to the healthcare industry (including insurance companies).

I / We, the undersigned, hereby certify that all the above information provided is true and correct in every respect.

Patient's signature : _____

NOK's signature: _____

Patient's name : _____

NOK's name: _____

Date : _____

Date: _____