



Authorization to Release Information

I, the undersigned, hereby authorize **Innovative Horizon Technologies Inc. DBA Bitcoin4U** to release any and all documents, information, or records pertaining to the services I have received, including but not limited to service, financial, administrative, and other relevant records, to the following individual or organization:

Name/Organization: _____

Phone Number: _____

Email Address: _____

I understand that this release is voluntary and that I have the right to revoke my consent at any time by providing written notification to **Innovative Horizon Technologies Inc.**, except to the extent that action has already been taken in reliance on this authorization. I acknowledge that once my information is disclosed, it may no longer be protected under certain privacy regulations, and I release **Innovative Horizon Technologies Inc.** from any liability that may result from such disclosure.

This authorization will become effective on the date of my signature and will remain in effect until revoked by me in writing.

I understand that **Innovative Horizon Technologies Inc.** will handle my information confidentially in compliance with all applicable federal and provincial laws, including but not limited to the Personal Information Protection and Electronic Documents Act (PIPEDA) and any other relevant privacy regulations.

By signing below, I confirm that I have read and understand the terms of this release.

Printed Name: _____

Date of Birth: _____

Signature: _____

Date: _____