



Canadian
Administrator of
VRS (CAV), Inc.

Administrateur
canadien du
SRV (ACS), inc.

CONSENT TO DISCLOSURE OF PERSONAL INFORMATION SRV CANADA VRS

Dear **SRV Canada VRS** user,

The following information has been prepared to assist you in communicating with organizations, such as banks, healthcare facilities and many government offices. These organizations often require written authorization allowing them to talk with you through a “third-party”, which in this case is a VRS interpreter (VI). In legal terms, this is referred to as giving your “Consent to Disclosure of Personal Information” as they are disclosing your Personal Information to someone who is not you; the VI.

The Administrator of **SRV Canada VRS**, (CAV) has prepared a form that you can fill out and give to the organization requesting your consent. Here’s how to fill out the form.

1. On the first line - write your full name
2. On the second line - write the name of the organization you wish to authorize.
(An example might be – the name of your Bank)
3. Sign it
4. Date it

For users under the age of 18:

1. Print the name of your parent or guardian
2. Have parent or guardian sign it

Once you have completed the form, give it to the organization that is requesting the written consent, along with the following supporting information sheet and web references. We cannot guarantee that the organization will accept this form. In fact, they may have their own form for the same purpose, and ask that you fill that one out.



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Consent to Disclosure of Personal Information Form

Consent to Disclosure of Personal Information

[print full name of VRS User]

I, _____ have read and agreed to the Terms and Conditions of Use of **SRV Canada VRS** and understand and agree that the collection, use and disclosure of my personal information in connection with the VRS Services is governed by the CAV Privacy Policy at srvcanadavrs.ca/en/privacy.

[print name of the business or organization, e.g. Bank]

I authorize _____ to disclose my personal information during a VRS call, and understand and agree that such information will be accessible to third-party sign language interpreters used by **SRV Canada VRS**, and may be accessible to service providers or contractors that perform services in connection with the VRS call. I understand that I may withdraw this authorization at any time, and that the withdrawal of consent is not retroactive.

For adult users

For users under 18 years of age

Signature

Print name of Parent or Guardian

Date: (dd-mm-yyyy)

Signature

Date: (dd-mm-yyyy)



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**INFORMATION SHEET
CONSENT TO DISCLOSURE OF PERSONAL INFORMATION
SRV CANADA VRS**

Dear Service(s) Provider:

The Canadian Administrator of VRS, (CAV) Inc., has been set up by the Canadian Radio-television Telecommunications Commission (CRTC) to facilitate telephone communication by the Deaf community who uses sign language.

We request your help in that endeavour and have prepared the attached form to give you comfort that the Deaf person has given their explicit, written permission for you to release their personal information to the sign language interpreter while using **SRV Canada VRS**.

How it Works

SRV Canada VRS is a video relay service ("VRS") which allows the Deaf and Hard of Hearing (DHH) who use American sign language or Langue des signes québécoise to communicate with English and French speaking telephone users. The sign language user connects to a VRS sign language interpreter using Internet based videoconferencing. The VRS interpreter places a voice telephone call to the hearing party and relays the conversation from sign language to voice and vice versa. You can learn more about **SRV Canada VRS** at srvcanadavrs.ca or contact us at support@srvcanadavrs.ca.

Terms of Use

Users must register to use the VRS. During registration, the users provide a civic address in Canada, and attest that they are deaf and use sign language, and are of age of majority. They also agree to the Terms and Conditions of Use, in which users of **SRV Canada VRS** provide knowledgeable consent to interpreters' access to the contents of the VRS call and agree to CAV's [Privacy Policy](#) which is incorporated into the Terms and Conditions. Interpreters are contractually obligated to maintain strict confidentiality with respect to the contents of a VRS call. CAV does not record the contents of the VRS calls and does not collect any personal/confidential information revealed in a conversation during a VRS call unless under court order.

We appreciate your assistance with empowering Deaf sign language users to speak with you via VRS. We want you to know that CAV protects privacy and confidentiality in accordance with the Personal Information Protection and Electronic Documents Act (PIPEDA) and CRTC Regulatory Policy CRTC 2014-187. CAV has provided the attached form of written consent for organizations that participate on VRS calls. The form constitutes a template that we hope will be useful. CAV does not warrant or represent that the form complies with legal obligations that may exist in the jurisdiction of your organization.

Sincerely,

Sue Decker
Executive Director