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# Warm Hands Therapeutics

*Receipt of Notice of Privacy Practices  
Written Acknowledgement Form*

I, \_\_\_\_\_ have read a copy of Warm Hands  
(Client Name)

Therapeutics' Notice of Privacy Practices.

\_\_\_\_\_  
(Signature of Client, Parent, or Legal Guardian)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Witness)

\_\_\_\_\_  
(Date)



*Remember, if it's starting to stick,  
Its time to call Nick.*