

Financial Information Sharing Consent

By signing this document, you consent to the collection, use, and disclosure of your financial information as described below.

Personal Details

Full Name:

Date of Birth:

Email Address:

Consent Details

I authorize **[Company Name]** to share my financial information with third parties as necessary for the provision of services, compliance with regulations, and other purposes outlined in the privacy policy.

☐ I agree to the Financial Information Sharing Consent.

Signature:

Date: