

# Release of Information Consent Form

## Lyft Transportation Service

Dakota County Community Living Services

Dakota County Social Services

1 Mendota Road W., Suite 300 West St. Paul, MN 55118

### Explanation of Your Rights

You have voluntarily agreed to participate in the Lyft Transportation Service by signing the Eligibility Criteria, Participation Requirements and Potential Risk. This Consent governs the exchange of your private information by Dakota County Social Services Community Living Services (Dakota County) and Lyft, Inc. (Lyft) to enable your participation in the Lyft service. Please know that:

- You have the right to choose what private information Dakota County releases to Lyft
- You have the right to ask Dakota County to explain the consequences for giving or not giving your permission to exchange private information with Lyft.
- You have the right to ask Dakota County any questions about what this Consent means for you and your situation.
- You may withdraw your permission at any time. Withdrawing your permission will not affect the information that Dakota County has already released because Dakota County had your permission to exchange the information. Please send your written request to withdraw your consent to the address above or to [data.privacy@co.dakota.mn.us](mailto:data.privacy@co.dakota.mn.us). You may also call Dakota County's Data Practices Compliance Official if you have a question about withdrawing your permission at 651-554-6244.

### Consent to Release

D.O.B.

I,

**Give my permission for Dakota County and Lyft to exchange the following private information about me:**

- My cell phone number that I used to set up my Lyft account
- That I am a Dakota County Social Services client
- Information on the trips that I take with Lyft including, but not limited to pick-up and drop-off locations, total trip amount and trip time.
- Other (be specific):

**I understand that Dakota County and Lyft want to exchange this information to coordinate my services and bill for my Lyft rides.**

### Acknowledgement of Consequences of Signing

- I understand that signing this Consent is voluntary and I do not have to allow Dakota County and Lyft to exchange any of the above information. This information cannot be exchanged without my permission.
- I understand that my eligibility to receive existing benefits from Dakota County will not be affected if I refuse to sign this release. **However, I also understand that if I refuse to sign this Consent, I will not be able to participate in the Lyft service.**
- I understand that Dakota County and Lyft have entered into an agreement that protects the privacy of my information listed in this Consent. However, I also understand that Dakota County cannot make any assurances about the security of my information on Lyft's networks or applications. Please review Lyft's Privacy Policy for information on how Lyft handles your information: <https://www.lyft.com/privacy>.
- I understand that I have a right to ask for more explanation before I sign this Consent.

### Signature and Expiration Date

By signing this Consent, I am acknowledging that I agree that Dakota County and Lyft may exchange my information listed above for the specific purpose described.

I UNDERSTAND THAT THIS CONSENT EXPIRES . IF I DO NOT SELECT AN EXPIRATION DATE, THIS CONSENT WILL EXPIRE TWO (2) YEARS FROM THE DATE I SIGN BELOW, UNLESS EARLIER REVOKED BY ME.

Date

Signature of Client/Guardian

Relationship to Client