

Dr. Jugenburg Class Action

OPT-OUT FORM

This is **NOT** a Claim Form.

Class Members who wish to pursue their own action or who do not want to be bound by the outcome of this Action **MUST OPT OUT** of this Action, and may do so by completing this **OPT-OUT FORM**.

TO: HOWIE, SACKS & HENRY LLP
Att'n Dr. Jugenburg Class Action
20 Queen St. W., Suite 3500
Toronto, ON M5H 3R3
Fax: 416-361-0083
Or email: jugenburgclassaction@hshlawyers.com

Please read and confirm your agreement by checking each box:

- I acknowledge that I am opting out and I am confirming that I do not wish to participate in the Dr. Jugenburg privacy Class Action.
- I acknowledge that Class Members who wish to pursue their own actions, or who do not want to be bound by the outcome of this Class Action must opt out.
- I acknowledge that if I wish to pursue my own claims against the Defendants relating to the matters at issue in this Class Action, I should seek independent legal advice, which will be at my own expense.

Name:

Mailing Address:

Telephone:

Email:

Signature: