

## SNYPR APP CONSENT FORM

Please complete this form and either (1) scan and email it to [support@snypr.com](mailto:support@snypr.com), or (2) mail it to SNYPR, 160 Wildwood Ave., San Carlos, CA 94070.

I, \_\_\_\_\_ (**print name of parent or legal guardian**)  
am the parent or legal guardian of \_\_\_\_\_ (**print child's name**).  
I have reviewed SNYPR's Privacy Policy and Terms of Service located on  
[www.snypr.com](http://www.snypr.com).

I understand that in consenting to my child's registration for an account with the SNYPR App, I am enabling my child to participate in all aspects of the SNYPR App, including his or her username appearing on public and team leaderboards, and participating in competitions and activities with other users.

I understand that participation in these activities may enable my child's username to publicly appear on a team, regional or global leaderboard. I understand that what other users of the SNYPR App do with this information is beyond the control of SNYPR.

I understand that my child's personal information (such as name, username, zip code, gender, birthday and email address) will be collected and processed in the United States and that the SNYPR App uses cookies and similar technologies as described in the Snypr Privacy Policy. I understand that SNYPR does not rent, sell or share my child's personal information with other people or nonaffiliated companies for direct marketing purposes, and does not such provide such data to any third-party ad networks. I understand that SNYPR may share information collected from my child with third parties that it retains for assistance with the operation of its business, or with other third parties as described in the SNYPR Privacy Policy. I understand that SNYPR may communicate with my child by an in-App push notification or email. I consent to these practices.

I understand that I may withdraw my permission granted herein by contacting SNYPR at [support@snypr.com](mailto:support@snypr.com).

In order to complete the my child's registration for the SNYPR App, I am providing the following information to SNYPR:

Child's Name (first/last): \_\_\_\_\_  
Zip Code: \_\_\_\_\_ Gender (M/F): \_\_\_\_\_  
Birthday: \_\_\_\_\_ Email Address: \_\_\_\_\_

By signing below, I authorize my child's register of the SNYPR App and participation in the activities offered through the SNYPR App.

Parent/Legal Guardian's signature: \_\_\_\_\_

Parent/Legal Guardian email address: \_\_\_\_\_

Date: \_\_\_\_\_