

**AUTHORIZATION TO RECEIVE INFORMATION / UPDATES
AND WAIVER OF LIABILITY**

I, _____, a Filipino of legal age and with permanent address at _____, Philippines, do hereby authorize Mr. / Ms. _____ to receive information or updates pertaining to the following:

- my own case or request for assistance;
- the case or request for assistance of Mr. / Ms. _____, as his / her next-of-kin (NOK).

Further, I have confirmed that the case or request for assistance is being processed by the Embassy of the Philippines in Riyadh and / or other concerned Philippine government agencies in the Kingdom of Saudi Arabia.

Finally, I acknowledge that case updates and / or related information are confidential in nature and, as prescribed by law. Hence, I am also hereby waiving any liability on the part of the Embassy of the Philippines in Riyadh and / or other concerned Philippine government agencies, relating to or caused by any form of dissemination or disclosure of such information and / or updates by my authorized recipient.

_____ Name and signature of ATN client or NOK	_____ Name and signature of Authorized Recipient
Date: _____	Date: _____
Contact no.: _____	Contact no.: _____

SUBSCRIBED AND SWORN to before me this ____ day of _____ 20____, by _____ who exhibited to me his ID No. _____ issued on _____ at _____.

Administering Officer

Doc. No.: _____
Page No.: _____
Book No.: _____
Series of 20____.