

## CCPA-CPRA Consumer Request Form

Please complete this Request Form to submit a request to Blue Cloud Pediatric Surgery Centers, LLC ("Blue Cloud") regarding your rights under the California Consumer Privacy Act of 2018 ("CCPA") and mail it to the address provided below. We will not discriminate against you in any way for exercising your rights. Upon receipt of a Request Form, we may contact you to request reasonable identity verification information in accordance with the CCPA and all applicable law. In addition, if an authorized agent submits this Request Form on your behalf, we may contact you to obtain a written authorization regarding the agent if we have not received one already. Blue Cloud will promptly process this Request Form and provide you with confirmation or response as required under the CCPA.

Blue Cloud Pediatric Surgery Centers, LLC  
9709 Lakeside Blvd., Suite 350  
Spring, TX 77381  
Attn: Legal

Please refer to our website privacy policy for additional information regarding the categories of Personal Information that we collect, the purposes for which we use and disclose Personal Information, and your rights under California law.

### *Personal Details*

If you are submitting this Request Form as an authorized agent for another individual, please complete the personal details below for the data subject and include the same personal details for yourself as the authorized agent.

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Email Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

Relationship with Blue Cloud (circle all that apply):

Customer or Patient

Employee or Job Applicant

Other

*Type of Request* (circle all that apply):

Know and Access.

I want to know and access the Personal Information that Blue Cloud has collected about me.

Delete.

I want Blue Cloud to delete Personal Information that it has collected about me.

Correct.

I want Blue Cloud to correct Personal Information that it has collected about me.

Limit Use and Disclosure of Sensitive Personal Information.

I want Blue Cloud to limit the use and disclosure of Sensitive Personal Information that it has collected about me. In accordance with the CCPA and all applicable law, I understand that Blue Cloud will maintain the right to continue using and disclosing my Sensitive Personal Information in a manner that is reasonably necessary and proportionate for any of the following business purposes:

- Performing and providing its regular services and goods.
- Preventing, detecting, and investigating security incidents that compromise the availability, authenticity, integrity, and confidentiality of stored or transmitted personal information.
- Resisting malicious, deceptive, fraudulent, or illegal actions and prosecuting those responsible for those actions.
- Ensuring the physical safety of natural persons.
- Short-term transient use, including non-personalized advertising shown as part of a consumer's current interaction with Blue Cloud.
- Performing services on behalf of Blue Cloud, such as maintaining or servicing accounts, providing customer service, processing or fulfilling orders and transactions, verifying customer information, processing payments, providing financing, providing analytic services, or providing storage.
- Verifying or maintaining the quality or safety of a service, product, or device that Blue Cloud owns, manufactures, or controls, or improving, upgrading, or enhancing any such service, product, or device.
- Collecting or processing Sensitive Personal Information where the collection or processing is not for the purpose of inferring characteristics about any consumer

Please also note that, as permitted by the CCPA, Blue Cloud reserves the right to use Personal Information or Sensitive Personal Information whenever necessary to (i) comply with any applicable law or court order or subpoena issued by a court or government agency of proper jurisdiction; (ii) comply with a civil, criminal, or regulatory inquiry, investigation, or summons by federal, state, or local authorities; (iii) cooperate with any government agency concerning conduct

that may violate any applicable law or in an emergency situation; or (iv) exercise or defend any rights or legal claims.

### *Additional Request Details*

Please attach additional sheets to provide all relevant additional information, which may help us to process your request. For example, for a Request to Delete, explain whether you want Blue Cloud to delete all Personal Information or explain which specific Personal Information you want deleted. For a Request to Correct, state the Personal Information that is incorrect and how it should be corrected.

### *Response*

If you submit a Request to Know and Access, Delete, or Correct your Personal Information, we will make our best efforts to provide you with written confirmation of receipt of your request within ten (10) business days. We will also provide you with written notice once we have finished processing your request within forty-five (45) calendar days of the date on which we received your request.

If you submit a Request to Limit the Use and Disclosure of your Sensitive Personal Information, we will provide you with written notice once we have finished processing your request, which will occur within fifteen (15) business days of the date on which we received your request.

### *Certification*

I certify and swear under the penalties of perjury that the information provided on this Request Form is correct to the best of my knowledge and that I am the person to whom the Personal Information described above relates, or an authorized representative of such person with the required permission to submit this Request Form. I understand that my rights as a California resident are subject to certain exceptions and limitations, including some which may not be expressly listed in this Request Form. In accordance with the CCPA and all applicable law, Blue Cloud may decline to process my Request Form in certain circumstances if, upon reasonable request by Blue Cloud, I am unable or decline to provide suitable verification information that is necessary to effectuate this Request Form.