

### **Pacemaker Release Waiver**

The Subscriber named below acknowledges that they have been informed by Halo Monitoring that Halo has not tested the myHalo Chest Strap Transmitter with a pacemaker or intravenous cardiac devices and has advised the Subscriber that the chest strap transmitter should not be worn by the Subscriber before consulting with and getting clearance from their physician/cardiologist.

By signing below the Subscriber acknowledges that they have received clearance from their physician to wear the myHalo Chest Strap Transmitter.

Subscriber Name: \_\_\_\_\_

Subscriber's Signature\_\_\_\_\_Date\_\_\_\_\_

#### Copies to:

Subscriber (to retain a copy)

Halo Monitoring, Inc.  
515 Sparkman Drive  
Huntsville, AL 35816

Call Center