

# Class Action Consent Form

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Class Action Defendant's Name]

[Defendant's Address]

[City, State, Zip Code]

## **Subject: Class Action Consent**

Dear [Defendant's Name],

I, [Your Name], hereby consent to participate in the class action lawsuit titled "[Name of the Case]" against [Defendant's Name]. I understand that by signing this consent form, I am allowing my claims to be included in this class action and am agreeing to abide by the court's decisions and rulings.

Please find my signature below as confirmation of my consent and participation:

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[Your Signature]

[Date]

Thank you for your attention to this matter.

Sincerely,

[Your Name]