



BJ'S OPTICAL® - CUSTOMER ACKNOWLEDGEMENT FORM

Thank you for choosing BJ's Optical. If you have any questions, please speak with any member of the BJ's Optical staff.

—

By signing below, I hereby acknowledge receipt of the Notice of Privacy Practices of **BJ's Wholesale Club, Inc.**, and consent to the collection, processing, and sharing of your personal information by BJ's Optical for the provision of products and services, as described in the Notice of Privacy Practices.

Further, I agree to be bound by BJ's Terms of Use located at BJs.com/termsfuse.

NAME OF CUSTOMER (PRINTED)

NAME OF PARENT / LEGAL GUARDIAN (*if customer is a minor*) / **AUTHORIZED PARTY (PRINTED)**

SIGNATURE OF CUSTOMER OR PARENT / LEGAL GUARDIAN / AUTHORIZED PARTY

DATE