

OPT-IN CONSENT FORM

Linda Roberts and Elizabeth Espree v. Baptist Healthcare System, LLC et. al.

1:20-cv-92-MC

United States District Court, Eastern District of Texas

If You Wish To Participate In This Lawsuit, Complete This Form And Submit To:

BAPTIST HOSPITALS FLSA LITIGATION

c/o ILYM Group, Inc.

P.O. Box 2031

Tustin, CA 92781

claims@ilymgroup.com

Name:	Date of Birth:
Address:	Phone No. 1: Phone No. 2: E-mail Address:

CONSENT TO JOIN COLLECTIVE ACTION

Pursuant to the Fair Labor Standards Act, 29 U.S.C. §§ 201, et seq.

- I consent and agree to pursue my claims relating to and arising from Defendants' (Baptist Behavioral Health Center) alleged violations of the Fair Labor Standards Act, 29 U.S.C. §§ 201, et seq. in connection with the above-referenced litigation.
- I have worked as a/an **(RN or Psych Tech)** _____ for Defendants in **(city, state)** _____ from approximately on or about **(date)** _____ to approximately on or about **(date)** _____.
- I understand that this litigation has been filed as a proposed collective action under the Fair Labor Standards Act of 1938, as amended, 29 U.S.C. §§ 201, et seq. I hereby consent, agree, and opt-in to become a Plaintiff herein and be bound by any judgment of the Court or any settlement of this action.
- I specifically authorize my attorneys, Schneider Wallace Cottrell Konecky LLP to prosecute this lawsuit on my behalf and to negotiate a settlement of any and all claims I have against the Defendants in this litigation.
- If needed, I authorize Schneider Wallace Cottrell Konecky LLP to use this consent to re-file my claim in a separate lawsuit against Defendants.

_____ (Date Signed)	_____ (Signature)
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****IMPORTANT NOTE****

If you choose to join this lawsuit, you should return this form as soon as possible to preserve your rights under the applicable Statute of Limitations.