



## Codman Square Health Center

### Codman Square Health Center

637 Washington Street  
Dorchester, MA 02124  
(617) 825-9660

#### Confidentiality Agreement

I agree that it is my responsibility to protect and preserve the confidential nature of all information concerning business affairs of the Codman Square Health Center.

I shall not release such information or any other confidential information to any outside source unless specifically authorized to do so.

To ensure the protection of such information, and to preserve any confidentiality necessary, it is agreed that

1. The Confidential Information to be disclosed can be described as and includes:

*Invention description(s), technical and business information relating to proprietary ideas and inventions, ideas, patentable ideas, trade secrets, drawings and/or illustrations, patent searches, existing and/or contemplated products and services, research and development, production, costs, profit and margin information, finances and financial projections, customers, clients, marketing and current or future business plans and models, regardless of whether such information is designated as "Confidential Information" at the time of its disclosure.*

2. The Recipient shall limit disclosure of confidential information within its own organization to its directors, officers, partners, members, employees and/or independent contractors having a need to know. The Recipient will not disclose the confidential information obtained from the discloser unless required to do so by law.

3. This Agreement states the entire agreement between the parties concerning the disclosure of confidential information. Any addition or modification to this Agreement must be made in writing and signed by the parties.

If any of the provisions of this Agreement are found to be unenforceable, the remainder shall be enforced as fully as possible and the unenforceable provisions(s) shall be deemed modified to the limited extent required to permit enforcement of the Agreement as a whole.

CSHC Board Confidentiality Agreement final 112910

WHEREFORE, the parties acknowledge that they have read and understand this Agreement and voluntarily accept the duties and obligation set forth herein.

Name: (Print) \_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_\_

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