



RELEASE FORM - Information

Release of Written Information

I, _____, hereby grant permission to Chimes to release from my permanent record the following information:

Permission for release is for one time only at the time I sign this release.

Name (Print) _____
(Parent, if under 18 or Legal Guardian, if applicable)

Signature _____ Date _____
(Parent, if under 18 or Legal Guardian, if applicable)

Witness name (Print) _____ Witness signature _____

Release of Verbal Information

I, _____, hereby grant permission to Chimes to release verbal information in person or by phone regarding my progress, incidents, well-being, daily activities and/or any relevant information for a period to cover the next twelve (12) months taking effect from the date signed below.

Name (Print) _____
(Parent, if under 18 or Legal Guardian, if applicable)

Signature _____ Date _____
(Parent, if under 18 or Legal Guardian, if applicable)

Witness name (Print) _____ Witness signature _____

Denial of Permission

I, _____, **do not** grant permission to Chimes to release verbal information in person or by phone regarding my progress, incidents, well-being, daily activities and/or any relevant information

Name (Print) _____
(Parent, if under 18 or Legal Guardian, if applicable)

Signature _____ Date _____
(Parent, if under 18 or Legal Guardian, if applicable)

Witness name (Print) _____ Witness signature _____