

Jacqueline Vanbetlehem, BSW, MA, RSW, Acc. F.M.

Therapy, Mediation, Custody Assessments, Parenting Coordination, Mediation/Arbitration

Phone: 905-337-8675

Fax: 905-337-8684

E-mail: jvanbetlehem@cogeco.ca

Website: www.vanbetlehem.ca

CONSENT FOR INFORMATION EXCHANGE

I _____
(full name)

of _____
(address)

consent to the exchange of information between,

Jacqueline Vanbetlehem, RSW., Acc.F.M.
(name of therapist)

and _____
(name of service, agency, hospital or individual)

in respect of _____

I understand that such information will be for the purposes to assess my needs or assist with the implementation, coordination and follow up of any treatment plan or service initiated by Jacqueline Vanbetlehem.

I understand that any discussion, or documentation exchanged, will be held in confidence by Jacqueline Vanbetlehem except where otherwise indicated for Parenting Coordination, Custody/Access Assessments, Therapeutic Access, Capacity Assessments for Property or Personal Care, or where limited by the law.

This Consent for Information Exchange will expire one year following the date on which it was signed and cover any information obtained by Jacqueline Vanbetlehem since service commenced. The client may rescind or amend the authorization in writing at any time prior to the expiration date.

(Client's Signature)

(Client's Signature)

(Date)