

PERMISSION TO SHARE PROTECTED HEALTH INFORMATION

At the Samaritan Center we work to maintain confidentiality. This extends to such basic issues as making appointments or explaining financial information – even acknowledging that a person is our client.

Unless you give us permission to do otherwise, anyone who requests to talk with us about your work here will be told that we cannot say whether or not you are a client here, and we cannot give out any information about clients without prior written permission. Sometimes clients choose to allow us to discuss specific matters – such as appointment times - with certain persons, such as spouses, parents, children, or friends. This form allows you to designate certain persons with whom we can speak, and to specify what kinds of information we can share.

Check the box for each person you give us permission to:

Name	Confirm Appointment Times and dates	Set or Cancel Appointments	Discuss Financial Information	What is their relationship to you?

Additionally, at times we may want to contact you by telephone. Example: your therapist may have an emergency and need to change the time of your session. It is up to you to decide whether to give us permission to contact you, and to set any limits about such calls.

Check the box for each number if you give us permission to: MUST LIST AT LEAST ONE NUMBER

(Please fill in numbers)	Number to call first	Leave messages with anyone who answers	Leave messages on voicemail / machine
Home:			
Cell:			
Work:			
Other:			
Other:			

Client (Print)

Signature (Guardian if Minor)

Date