T.C.I. Therapy, LLC

Jeffrey Piercy M.S., LMHC, CCTP, CCATP, ASDCS
1637 Race Track Road Suite 236
St. Johns, FL 32259
(904) 716-3828 jeff@tcitherapy.com www.tcitherapy.com

RELEASE OF INFORMATION

Client: _____ **Date of Birth:** _____ **Last 4 of Client SSN:** _____

Authorization to: ☐ Receive from (only) ☐ Release to (only) ☐ Exchange with

Contact Information for the Person, Entity, or Facility:

Name: _____
Address: _____
Phone Number: _____
Email Address: _____

Check All That Apply:

☐ Financial/billing/payment information ☐ Treatment plan ☐ Consent forms
☐ Session dates/times ☐ Progress notes ☐ Diagnosis
☐ Biopsychosocial assessment ☐ Treatment progress
☐ Other: _____

Date Consent Begins: _____

Date Consent Expires (Check One): *(If blank, exp. date defaults accordingly)*

☐ Receive, release, or exchange (once) within 30 days: Expiration date: _____
☐ Receive, release, or exchange (unlimited) for 6 months: Expiration date: _____
☐ Receive, release, or exchange (unlimited) for 1 year: Expiration date: _____

If parents/legal guardians are currently engaged in legal action with one another (divorce proceedings, custody disputes, parenting plan modifications, etc.), provider must be informed at the time of the child's intake appointment. Provider will NOT be held liable for parents/legal guardians' failure to do so.

I understand, acknowledge, and agree that this information will be released in the following ways: verbally, written, mailed, and/or sent electronically (fax, email, etc.). I give full consent to release the above identified information only to the above identified person, entity, or facility. I agree not to hold T.C.I. Therapy, LLC or Jeffrey Piercy M.S., LMHC, CCTP, CCATP, ASDCS responsible in the event any information (in accordance with this consent form) is received by the incorrect recipient. I also understand that I may revoke this consent form at any time through written correspondence only.

_____ _____ _____
Client or Legal Guardian Signature Relationship to Client Date

Signature acknowledges that I freely agree to all of the above mentioned.