

Still Waters

Counseling, Consulting, and Psychological Services

Release of Confidentiality Form

Re: _____

I, _____, realize that Still Waters Counseling, LLC will not be held responsible for the confidentiality of _____ as it is leaving the agency by its own means. I understand that they cannot be held responsible, as they have no control over how I may choose to use this information once it is in my possession.

Client Signature and Date
(or parent/guardian when applicable)