



Release of Information Form

I(We), _____, hereby authorize Pali
Name of parent(s) or legal guardian

View Baptist Preschool, to release the following information:

pertaining to _____, _____ to the
Name of student Date of Birth

1. _____
Name of school/professional agency

Address

This consent is subject to revocation at anytime, but not retroactively. This consent will expire on September 1 of the following school year, or at the time the child ceases to be enrolled at Pali View. All other disclosure without written consent of the person to whom they pertain to or from the parent or legal guardian is prohibited.

Signature

Signature

Relationship

