

Talk Therapy With Laurie

1604 Westgate Circle, Brentwood TN 37027 • 2621 Gallatin Pike, Nashville TN 37211

Phone 615-332-4357 • TalkTherapyWithLaurie@gmail.com • TalkTherapyWithLaurie.com

Authorization Consenting To Release Of Information

I, _____, authorize _____
to discuss and exchange, in verbal or written form, any relevant information to my treatment with the
person, or any person(s) or staff of the institution, named below.

Laurie Baldwin, Talk Therapy With Laurie
(supervised by Gayden Fite, East Nashville Counseling)

Name / Institution Name

2621 Gallatin Pike, Nashville TN 37211

Address

615-332-4357

NA

Phone Number / Fax Number

For the following reason(s):

____ Psychological Assessment

____ Medical Records

____ Coordination of Care

____ Other: _____

You may revoke this consent at any time. Unless otherwise revoked or renewed, this consent is in effect for one year from the date of the last session. This consent is subject to all conditions outlined in the Office Policies & Consent to Psychotherapy Services.

Client / Legal Guardian Signature

Date

Client / Legal Guardian Printed Name