



I, \_\_\_\_\_, **authorize Janelle L. Williams, LPC**

**to disclose to** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**the following specific information from my record:** \_\_\_\_\_  
\_\_\_\_\_

**for the purpose of** \_\_\_\_\_  
\_\_\_\_\_

**This consent to disclose information may be revoked by me at any time, except to the extent that action has already been taken in reliance thereupon.**

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_