



# Rock Township Ambulance District



## Authorization for Release of Medical Information

PATIENT NAME: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

SSN: \_\_\_\_\_

1. I am a parent or guardian of a child or other individual who, because of his/her physical condition or other health-related reason, is often referred to as one who has "special needs."

2. I am aware that Rock Township Ambulance District has a program in place entitled "Special Needs Tracking and Awareness Response System" (STARS) to assist with the quickest possible medical assistance and response for my child or other special needs person named above.

3. I hereby authorize the use or disclosure of the above-named individual's health information, including mental health information to Rock Township Ambulance District, the school in which the child is attending, and Jefferson County 9-1-1.

4. I understand that I have a right to cancel this Authorization at any time. I understand that if I wish to withdraw this Authorization, I must do so in writing. I must present my written cancellation to Rock Township Ambulance District, the school which the child is attending, and Jefferson County 9-1-1. I understand the authorization withdrawal will not apply to information that has already been released due to this authorization.

5. I understand that authorizing the release of this health information is voluntary and that I am not required to sign this Authorization. I understand that any disclosure of information carries with it the possibility for an unauthorized re-disclosure and the information may not be protected by federal confidentiality rules. I agree that I have received a signed copy of this Authorization if I chose to do so.

6. A copy of this Authorization shall be sufficient to authorize the release of the aforesaid records.

X \_\_\_\_\_  
(Signature of Parent or Guardian) (Specify Relationship to Patient) (Date)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

My Commission Expires: