Clarity Counseling, LLC

7150 Heritage Village Plaza,
Unit 201 Gainesville, VA
20155

11733 Bowman Green Dr.
Suite 100 Reston VA, 20190

2540 Professional Road
Suite 2
Richmond, VA 23235

Phone: 571-318-9141
Aayvas@gmail.com
www.ClarityCounselingVA.com
TherapyAppointment.com

NPI# 1740932185
EIN: 87-3905070

Authorization to Release Confidential Records and Information

Client Name_____ DOB_____

This will authorize Clarity Counseling to release information to and receive information from the following party:

Name_____

Address_____

Telephone_____

Fax/Email_____

The following information is authorized to be exchanged:

__ Information regarding services currently being provided
__ Information regarding past services
__ Treatment reports/summary/assessments
__ Family Involvement
__ Emergency contact
__ Substance Use Information
__ Other: _____

I have had explained to me and fully understand this request and authorization and authorize the release of records and information as described above. I understand I may revoke this consent at any time except to the extent that information has already been released. This consent will automatically expire one year from the signed date, on _____.

_____
Signature of Client Date

_____
Signature of Parent/Guardian (if applicable) Date

_____
Primary Therapist Date