



AUTHORIZATION FOR RELEASE OF PROFILE MATERIALS

We, _____, give permission to
Greater Hopes, Inc. and its agents to share, (initial all that apply)

_____ Family Book

_____ Pre-Placement Assessment and Updates

_____ Verbal information related to case planning

_____ Publicly viewable Online Profile

Initial all that apply:

_____ With parents considering us for the purpose of adoption

_____ With other child welfare agents with whom Greater Hopes collaborates

_____ Excluding our Pre-Placement Assessment and Updates, with the general population of persons interested in adoptive services including friends and family of possible placing parents, other potential adoptive parents, Greater Hopes Board of Directors, and volunteers of GHFS.

This authorization expires upon written request.

We have made or kept a copy for our records.

Signature: _____ Date: _____

Signature: _____ Date: _____