



## CONSENT TO COLLECTION AND DISCLOSURE OF CONFIDENTIAL INFORMATION

I, \_\_\_\_\_ (the client) give consent to the YWCA Lethbridge and District Outreach staff to collect and share information for the purpose of service delivery, advocacy and referrals. Confidential information will be shared with the following organizations:

- Alberta Department of Justice and Attorney-General or any officer of the Court
- Department of Solicitor General (i.e. Police officers, Probation officers, Duty officers)
- Southwest Alberta Child and Family Services
- Domestic Violence Action Team

Signature: \_\_\_\_\_

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