



DEPARTMENT OF PARKS AND RECREATION

Community Recreation Division, Therapeutic Recreation Office

Langston Brown Community Center 2121 N Culpeper St, Arlington, VA 22207

TEL 703-228-4740 • FAX 703-228-4877 • TTY Relay 711 • TRinfo@arlingtonva.us

Release of Information Form

I, \_\_\_\_\_ am enrolling \_\_\_\_\_ in
(Parent/Guardian) (Participant)

\_\_\_\_\_, during the \_\_\_\_\_. I hereby give the Therapeutic Recreation
(Name of program) (Season or week #)

Office of Arlington County my permission to share the following information (electronically or verbally) with the program listed above or below with the understanding that this information will be used to plan appropriate activities for my participant. Please check all that apply:

- Participant Modification Plan
Past program experiences
Recommendations for support (i.e., does not require additional staff, needs a specific modification, lowered ratio, 1:1, etc.)

If your participant is enrolling in more than one Arlington County Program, please list all programs below that you are granting permission for the Therapeutic Recreation Office to share information with.

Name of program: \_\_\_\_\_ Season or Week # \_\_\_\_\_
Name of program: \_\_\_\_\_ Season or Week # \_\_\_\_\_
Name of program: \_\_\_\_\_ Season or Week # \_\_\_\_\_
Name of program: \_\_\_\_\_ Season or Week # \_\_\_\_\_
Name of program: \_\_\_\_\_ Season or Week # \_\_\_\_\_
Name of program: \_\_\_\_\_ Season or Week # \_\_\_\_\_
Name of program: \_\_\_\_\_ Season or Week # \_\_\_\_\_
Name of program: \_\_\_\_\_ Season or Week # \_\_\_\_\_

Reminder: If you are registering your participant for a contracted camp (one without this logo: ) we recommend you speak to them first in order for you to get a better understanding of program life, areas of support needed for your participant, and how the program staff will provide support. If the contractor feels they would like to reach out to the Therapeutic Recreation Office we will be happy to work with them.

Parent/Guardian Signature: \_\_\_\_\_ (Date)