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**AUTHORIZATION FOR EXCHANGE AND RELEASE OF INFORMATION**

I authorize \_\_\_\_\_

and

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

To exchange the following specific information: \_\_\_\_\_

\_\_\_\_\_

In regard to: \_\_\_\_\_ myself \_\_\_\_\_ my child

Name: \_\_\_\_\_ DOB \_\_\_\_\_

For the purpose of: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Expiration date: \_\_\_\_\_

(maximum of one year from date signed)

This authorization is signed with the understanding that the information will not be passed on to anyone without my written permission, or be used for any other purpose than that specified above. Further, it is understood that I may withdraw this authorization in writing anytime prior to the expiration date.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date