

As a member of the Catoosa Local Interagency Planning Team, I hereby agree to the following:

- I understand that the above-mentioned youth (or his/her legal representative) has agreed to the disclosure of confidential information to our planning team for the purpose of creating a Community Care Plan, which may include securing services for them through LIPT member agencies. I hereby agree that unless I am contracting to provide these services, I will not disclose any of the information discussed in today's meeting regarding this individual.
- Furthermore, I understand that if I do agree to provide services to this person and disclosure of information is necessary to initiate or facilitate these services, I am not released from this agreement, but must obtain an additional release of information form the youth (or his/her legal representative) prior to such disclosure.
- I am aware that if the treatment information discussed includes (a) alcohol or drug abuse treatment or (b) educational records, that both of these sources are protected by state and/or federal law with regards to further disclosure, and will required additional written consent of the individual (or as otherwise permitted by federal law governing the confidentiality of alcohol and drug abuse patient records and/or education records, prior to further release of this information.

Name	Agency Represented (if applicable)	Date
Tony Vull	WIN GA	3/26/19
Tawanda Scales	DBHDD	3/26/19
Lamar Brown	Catoosa County School	3/26/19
Karla Meraz	Catoosa DFCS	03/26/2019
Lacey Goolsby	Catoosa DFCS	3-26-19
Meredith Sisk	Catoosa Co S.O	03/26/19
Kristie Norton	Catoosa DFCS	3/26/19
Rachel Brown	Catoosa DFCS	3/26/19
Angela Ransom	WIN GA	3/26/19
Amy Still	Woodstation	3/26/19
Melody Pennington	Woodstation	3/26/19
Karey Johnson	Family Menders	3/26/19
Sharon Aalfs	CCPS	3-26-19
Kevin Godfrey	LMCS	3-26-19
Anita Benko	Catoosa DFCS	3-26-19