



**Red Mountain Family Services, Inc.**

♦ PO Box 67197 ♦ Albuquerque ♦ N.M. ♦ 87193-7197 ♦ 505.994.0364 ♦ fax 505.994.0384

## Release of Information

I, \_\_\_\_\_

hereby give any agency that has previously issued a treatment foster care or regular foster care license to my family in the State of New Mexico the right to release a letter of good standing to Red Mountain Family Services and to allow a Red Mountain Family Services staff member to review any and all information contain within the treatment foster parent file. In cases where the family is not in good standing with a previous agency, I understand that the agency has the right to disclose this information to Red Mountain Family Services as well.

\_\_\_\_\_  
Treatment Foster Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Treatment Foster Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Red Mountain Family Services Staff

\_\_\_\_\_  
Date