



## Consent for Information Sharing

When parents of a child or adult with Cri du Chat Syndrome wish to contact other parents who have children with the Syndrome, we need permission to supply these details. This consent form allows the Group to disclose only the details you want the others to know. Please note that only the details that you choose would be disclosed to the parents of other children and you are welcome to modify your permissions by submitting an updated form at any time. We value your privacy and assure you that we will not disclose any information we have about you or your family, to any other person, carer, professional or organisation without your expressed permission.

This form also allows you to give permission for photographs, information and videos to be used by us on our website or in the course of our work of informing the parents and professionals about this syndrome. No personal contact details will be used by us in any media unless you request it.

If you are willing to give your permission for the disclosure of the information as outlined below, please tick the categories you give permission for, sign and date and return the form to **Natalie Elder, Secretary, 212 Cambridge Rd, MOOROOLBARK Vic, 3138** or by email: [secretary@criduchat.org.au](mailto:secretary@criduchat.org.au)

Best regards,

Dr Sue Green  
President

## Consent for Information Sharing

Please read and tick the appropriate boxes.

- ☐ I give my permission for the Cri du Chat Support Group Limited to disclose my telephone numbers to other parents of children/adults with Cri du Chat Syndrome.
- ☐ I give my permission for the Cri du Chat Support Group Limited to disclose my email address to other parents of children/adults with Cri du Chat Syndrome.
- ☐ I give my permission for the Cri du Chat Support Group Limited to disclose my residential and postal address to other parents of children/adults with Cri du Chat Syndrome.
- ☐ I give my permission for the Cri du Chat Support Group Limited to videotape my child/adult and for it to be viewed by parents of children/adults with the syndrome and to professionals with an interest in the syndrome.
- ☐ I give my permission for the Cri du Chat Support Group Limited to publish photographs of my child/adult supplied by me or taken by others at meetings of families/carers of children/adults with Cri du Chat Syndrome, in the group's publications which are circulated only to members of the support group and to professionals with an interest in the syndrome.
- ☐ I give my permission for the Cri du Chat Support Group Limited to publish photographs of my child supplied by me or taken at meetings or events for families/carers of children with Cri du Chat Syndrome, on the group's website which is publicly accessible.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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

Update your contact details if not filling in a membership form

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

State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Email: \_\_\_\_\_

Phone numbers: Land line \_\_\_\_\_ Mobile: \_\_\_\_\_

Membership to the Cri du Chat Support Group Limited is currently free. We encourage consideration of a tax-deductible donation to support group running costs, family events, and other group initiatives that aim to support our families.

Secure credit card payments (one-off payment or monthly donations) can be made via

[www.givenow.com.au/criduchatsupportgroup](http://www.givenow.com.au/criduchatsupportgroup)

For direct deposit - **Account Name:** Cri du Chat Support Group of Australia (Commonwealth Bank of Aust). BSB: 063 607 Account Number: 10157212