



**Applying New Knowledge:  
Learning & Transfer**

# **Child Care Training Consultants, LLC**

Reviewed and Updated: 01/03/2025

## **Release of Information**

Use this form to authorize the release of your contact/transcripts/information.

Name: \_\_\_\_\_ Registry ID#: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

By signing below, I grant Child Care Training Consultants, LLC permission to release my name and contact information to organizations that may need to notify me of upcoming events, and special events, etc.

Note: As policy, Child Care Training Consultants, LLC does not release any personal information about members. We implement a variety of security measures to maintain the safety of your personal information when you enter, submit, or access your personal information in the portal.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Email this form to:

Child Care Training Consultants, LLC.

Email: [childcaretrainingconsultants1@gmail.com](mailto:childcaretrainingconsultants1@gmail.com)