

## Confidentiality Form

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There are times when we will need to communicate with you by telephone. If you are not immediately available at these times, we will need to know how we may leave you messages. Please complete and sign the questionnaire below so we are clear about your wishes in this regard.

1. May we leave confidential information on your answering device at home?  
 Yes  No  N/A

2. May we leave confidential information on your cell phone voice mail?  
 Yes  No  N/A

3. May we leave confidential information on your voice mail system at work?  
 Yes  No  N/A

4. Please list below the names of people to whom we may give confidential information:

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Name/Relationship

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Name/Relationship

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Name/Relationship

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Name/Relationship

I confirm the information given above:

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Signature/Date