



Connect Child Care Resource and Referral
200 Upper Kanawha Valley Way
P.O. Box 369
Cabin Creek WV 25035
(304) 595-6401



I, _____, give permission for _____ to speak to Connect Child Care Resource and Referral regarding my child care case. I understand that I am giving Connect Child Care Resource and Referral permission to disclosed any and all information regarding my child care case to the above named person. I understand that until I notify Connect CCR&R that this person is no longer allowed to receive this information on my child care case, information will be released.

Client's Name

Client's Signature

Date

Social Security Number

I, _____, give _____ permission to pick up my child care certificate.

Client's Name

Client's Signature

Date

Social Security Number

State of West Virginia
 County of _____

The foregoing instrument was acknowledged before me on this _____ day of _____ 20__.

My commission expires _____

 Notary Public

Connect is a program of River Valley Child Development Services. Funding for Connect CCR&R is provided through West Virginia Department of Health and Human Resources, Bureau for Children and Families, Office of Children and Family Policy, Division of Early Care and Education.