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Notice to Guardians of Minor Children Re: Mental Health Services

The staff at Avalon Medical Group has explained to me that Alabama Law requires that persons who are 13 years of age or younger (i.e. a minor child) must have a parent or legal guardian provide consent prior to the minor child receiving mental health treatment. Exceptions to this law have been provided to me.

I understand, that as the parent or guardian of a minor child, I have the legal right to access my minor child's mental health information. However, it has been explained to me the value of allowing the information my minor child shares during mental health treatment to remain confidential between my minor child and their mental health care provider. I understand that any information about a minor child which arises in the course of their mental health treatment that is deemed by the provider to be of an urgent nature will be shared with the minor's parent or legal guardian as soon as possible, regardless of any other agreement and unless legal exceptions apply which would prohibit such disclosure.

By signing below, I acknowledge that I understand and agree to allow the information my minor child shares as a part of mental health treatment to remain confidential between themselves and their providers. It also indicates my understanding that as a parent or legal guardian I am not waiving my legal right to access my minor child's treatment information.

By signing below, I also indicate my understanding of the fact that, while my minor child cannot provide consent for treatment (other than situations previously described), it is very important to obtain the expressed approval of my minor child to receive mental health treatment. The signature of the minor child below indicates their understanding of this aspect of treatment.

| Parent/Guardian | Minor Child | |
|-----------------|-------------|--|
| | | |
| | | |
| Date | | |