



www.readottawa.org • info@readottawa.org • 616.843.1470 • 430 E 8th St #140, Holland, MI 49423

Release Of Information To READ Ottawa

for

Personal Contact Regarding a READ Ottawa Adult Learner

Adult Learner Name: _____

Address: _____

Phone: _____ **Email:** _____

I agree to have my READ Ottawa tutor, or a READ Ottawa representative, communicate to the following person(s):

I agree that these individuals may only share information relevant to my participation in the READ Ottawa program. Information may be shared by phone contact, email, or delivered to:

READ Ottawa
430 E 8th St #140
Holland, MI 49423
616-843-1470
info@readottawa.org

READ Ottawa Adult Learner (or Guardian) Signature Date

READ Ottawa Representative Date