



Brantford-Brant Stay Housed Initiative
Consent to Share Information

Client name:

Date of Birth (day/month/year):

Address:

Telephone:

Permission to leave detailed voice message

Consent for the Access and Disclosure of Personal Information

I _____ (name) consent to allow the following agencies to access and disclose the information outlined below:

City of Brantford, Housing and Homelessness Services

To access/disclose the following information: Name, contact information, information that supports coordinated service delivery. **(add additional information below if needed)**

Personal information will be shared between and among the agencies noted above to support client access to programs and services, which may be through email, in person, or via phone. All means of communication bear risk to privacy, and may reveal my personal information to other persons.



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Consent for Electronic Communications

I consent to being contacted by the following electronic means; and I acknowledge that The Corporation of the City of Brantford or the other agencies included in this consent are not responsible for any unauthorized access to my computer, telephone or accounts (including any data stored in the cloud).

Email:

Text:

It is the client's responsibility to update their contact information on file with each agency.

I have been provided an opportunity to ask questions related to this Consent and my questions were answered.

I acknowledge that I have read, understand, and agree with the information contained in this form.

OR

I acknowledge that someone has read the content of this form to me and I am providing verbal consent. Verbal consent was received because

Signed in _____, _____; and dated this _____ day of _____, 20____ year
City/Town Province

Client Name

Client Signature

Parent/Guardian Name

Signature

Witness Name, Title, Agency

Witness Signature



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Consent Guidelines:

- This consent form is valid until March 31, 2027
- You can remove consent at any time
- Failure to provide consent could prevent you from accessing certain programs.
- If you feel that some of your information is sensitive, or that sharing certain details could impact your safety or the safety of others, please discuss this with staff.
- Consent can only be provided if you are 16 years of age or older. If you are under the age of 16, consent will need to be provided by a legal guardian, or your information will not be shared.

Notice with Respect to the Collection of Personal Information: Personal information is collected pursuant to the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990 c. M. 56, as amended from time to time and will be used for the purpose of (i) data collection on the use of shelters; (ii) the collation of group and meta data; (iii) assessment of the program generally (including but not limited to the Operator's Services); and (iv) as otherwise permitted or required by law. For more information about this collection contact the Manager of Housing Stability at 519-759-4150, in 58 Dalhousie Street, PO Box 818, Brantford ON N3T 2J2.