

RACE BROOK SCHOOL
107 Grannis Road
Orange, CT 06477
203-891-8030

I grant permission for Race Brook School to: release to release from

_____ (SCHOOL/AGENCY)

_____ (ADDRESS)

_____ (CITY/STATE)

_____ (PHONE/FAX)

The following information regarding: _____

(Student)

(Date of Birth)

Cumulative Record Data
 Psychological Reports
 P.P.T./I.E.P. Data

Test Results
 Health Records

Please send records to:

RACE BROOK SCHOOL
107 GRANNIS ROAD
ORANGE, CT 06477
ATTENTION: Jane Gallagher
Email: jgallagher@orange-ed.org

SIGNATURE OF PARENT/GUARDIAN

DATE

(Address)

(Phone)