

Superior Court of California, County of Ventura

FAMILY COURT SERVICES
HALL OF JUSTICE
800 South Victoria Avenue
Ventura, California 93009
(805) 662-6694
Fax: (805) 654-2240

INFORMATION RELEASE AUTHORIZATION

I/We, _____/_____,
specifically authorize any public agency, private person or medical doctor, psychologist, treating
therapist, or hospital possessing information about me or my minor children, confidential or
otherwise, to release same (including copies) to the Superior Court through its duly appointed
court investigator. Such information to be used as the court may deem fit and proper for
determination of guardianship. This release includes but is not limited to, treatment for drug
and/or alcohol abuse and/or psychiatric treatment, employment records and bank records.

Date

Signature of Proposed Guardian

Date

Signature of Proposed Co-Guardian

This authorization is effective for one year from the date of signature.