



# Confidentiality Commitment Form

## OUR CONFIDENTIALITY COMMITMENT TO YOU AND YOUR FAMILY

As you begin your relationship with the Camden County Family Support Organization, we want to assure you that the information you share with us will remain entirely confidential.

Our employees, staff and volunteers must treat your information with the utmost respect and with total regard for your privacy.

Types of information that is safeguarded:

- Your and your children's name, address, phone number and email address;
- Financial, educational, medical, social, psychological, and other personal information about any member of your family;
- Any service your family is receiving from any agency including CCFSO

The only circumstance in which we would release any information would be:

- At your request with your written consent approving our discussion with an outside group or provider such as your child's school counselor, physician, therapist, etc.
- A situation of child abuse (or other forms of abuse) where it is a matter of state law to report it

Below are the signatures of an employee of Camden County Family Support Organization and the family we serve demonstrating that we have both read this commitment of confidentiality, understand the same and are in agreement with this. I understand I have the right to revoke this consent at any time by writing to the CCFSO office informing them.

---

Family Signature

---

Signature of CCFSO staff

---

Date document signed

Camden County Family Support Organization  
1030 Kings Highway North  
Suite 210  
Cherry Hill, NJ 08034  
(856) 662-2600  
[www.camdenfso.org](http://www.camdenfso.org)