**Release of Confidential Information – Volunteer Client**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, authorize Carly Anderson to record and make accessible the following recording(s) to participants of The Mentor Coaching Group for purposes of training in coaching skills.

Information to be released: Recording(s) of my coaching sessions of these dates:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand that the recordings of my coaching sessions will be used to assist coaches to understand and evaluate their coaching skills against the Coaching Core Competencies defined by the International Coaching Federation. <https://coachingfederation.org/> It is not an evaluation of the client, nor will client be asked to sign up for any coaching program.

**I understand that a link of the audio recording/s will be sent to group participants after the session for the sole purpose of their learning and review. We have asked each of our participants to respect and honor your confidentiality by not sharing the recording with anyone. An audio-visual recording is also available for confidential review by participants, within password protected folder in Vimeo.com account.**

We ask that you be responsible for determining confidentiality or protecting your privacy if you mention any company name or people you may work with.

This release form has been read/reviewed with me and I understand its content.

**Client Name:**

**Client Signature:**

*you can sign by typing your name above*

**Date**: