Disclosure Form

I, confirm that I have received a copy of personal information files:
For:
From
On
I understand that where information has been blocked out (redacted), it is because it refers to another person and not myself. If they have not given their permission for me to have their information, then by law it has to remain confidential.
I acknowledge that it is my responsibility to keep this information safe and secure.
Print Name:
Signed:
Print Name:
Signed: