



Consent for Video and Audio Recording
ADOS and STAT

I give permission for The Arc of Grays Harbor and Tess Lawson to record audio or video record the ADOS assessment or STAT screening for communicating with Dr. Robin Ballard, PhD (Madrona Psychological Services) and the Greater Grays Harbor SMART team members as part of my child's autism evaluation. I understand any recording will be kept confidential and only used for my child's evaluation needs to be viewed by those contributing toward her care. The video or recordings will be destroyed after adequate use.

Child's Name and Birthdate (printed)

Parent Name (printed)

Parent Name (signature)

Date
