

## **CAROLINA BEACH POLICE DEPARTMENT**

1121 N. Lake Park Blvd. Carolina Beach, NC 28428 Tel: (910) 458-2540 Fax: (910) 458-2988



## **Children and Resident Encounters (C.A.R.E)**

## **Release Waiver**

| l,  | give permission to the Carolina Beach            |
|---|--|
| Police Department to release any and a    | II pertinent information related to the care     |
| and/or well-being of                      | to the New Hanover                               |
| County 911 Communications Center an       | d New Hanover County Emergency Management.       |
| I understand this information will also k | pe released to other agencies such as local Fire |
| Departments, Law Enforcement, and/o       | r Emergency Medical Services who would be able   |
| to assist in the matter.                  |  |
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|   |  |
| Signature:                                | Date:  |
|   |  |
| Witness:                                  | Date:  |