



PRENATAL

**Request for connection with the Prenatal Parents First Call Program
From Down Syndrome Network (DSNetwork)**

DSNetwork Prenatal Parents' First Call program offers expectant families accurate, up-to-date information as well as the opportunity to connect with a parent who also received the diagnosis of Down syndrome prenatally. These parents are available 24/7 to listen, answer questions, and provide accurate information.

Due to privacy concerns, the hospital or medical professional cannot share your information with DSNetwork without your permission. If you would like to connect with us, please complete the following information:

I grant permission to _____ to release my name, address, phone number and baby's name and date of birth to the Down Syndrome Network (DSNetwork) so that I may be contacted and authorize such contact by the DSNetwork.

Signature: _____

Date: _____

Name (please print): _____

Address (street, city/town, state, zip): *Optional*

Home phone: _____ Cell phone: _____

E-mail: _____

I hereby release _____ (Hospital or Medical Professional), DSNetwork and their representatives from any and all liability for any and all such claims or damages which may at any time result on account of compliance with this authorization.

I am requesting (please check all that apply):

- Accurate, up-to-date written information about Down syndrome
- A phone call within 24 business hours from an DSNetwork Parent Mentor mom
- A phone call within 24 business hours from an DSNetwork Parent Mentor dad
- A phone call within 24 business hours from a Spanish-speaking Parent Mentor parent

Please EMAIL this form to info@dsnetworkaz.org

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