

# Tucker County Community Corrections

(Tucker Day Report)

Dustin Luzier, *Director*  
Amy Cummings, *Behavioral Health Director*  
213 First Street, Parsons, WV 26287  
Phone: 304-478-2833  
Fax: 304-478-4473



Alexis Baker, *Project Coordinator*  
Teresa Kincaid, *Registered Nurse*  
Brittany Mitchell, *Peer Recovery Coach*  
Jessica James, *Peer Recovery Coach*  
Travis Barnhouse, *Officer*  
Dominique Meadows, *Case Manager*

## Transportation Waiver and Consent for Services

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### I. Waiver

I recognize and acknowledge that there are certain risks of physical injury to vehicle passengers. I assume all risks and hazards incidental to the activities normally associated with transportation. I further release, absolve, indemnify, and hold harmless Tucker Day Report and its authorized transportation representative(s). In case of injury, I hereby waive all claims against Tucker Day Report and its authorized representative(s), and I likewise release from responsibility all person(s) transporting me.

I further consent to the rendering of emergency medical treatment for myself as deemed necessary by Tucker Day Report and its authorized representative(s). If the injury or illness is life threatening or in need of emergency treatment, I authorize Tucker Day Report and its authorized representative(s) to summon any and all professional emergency personnel to transport and assure the referral to hospital medical treatment by licensed professionals as needed. I agree to assume financial responsibility for all expenses of such care. It is understood that this authorization is given in advance of any such medical treatment but is given to provide authority and power on the part of Tucker Day Report and its authorized representative(s) in the exercise of his or her best judgment upon the advice of any such medical or emergency personnel.

In addition, I hold Tucker Day Report and its authorized representative(s) harmless for any lost personal items. I also understand that I may be denied transportation services if Tucker Day Report and/or its authorized representative(s) deem my behavior inappropriate or unsafe to themselves, the driver, and/or other passengers.

I do hereby fully release and forever discharge Tucker Day Report and its authorized representative(s) from any and all claims for injuries, damages or loss that I may have, or which may accrue to me and arising out of, connected with, or in any way associated with said transportation services.

### II. Confidentiality

I agree to the premise that all clients are obligated to hold all client information of the Tucker Day Report in confidence for both legal and moral reasons. Under no circumstances shall any information pertaining to another Day Report client be discussed with anyone outside of the Day Report.

I AGREE THAT I WILL NOT:

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- Discuss any client or any information pertaining to another client with anyone, including my own family.
- Discuss any client information pertaining to another client in any place where it may be directly overheard by anyone, especially other clients.
- Mention any client's name or admit, directly or indirectly, that a person named is a client.
- Describe any behavior which I have observed or learned through my participation at the Day Report.
- Contact any individual or agency outside of the Day Report to get personal information about another Day Report client.
- Record any encounters that occur while on Day Report property (buildings, vehicles, etc.), this includes but is not limited to conversations between myself, staff, and/or other clients, conversations not involving myself that I may overhear, regular daily interactions with staff, groups, therapy sessions, telehealth, peer recovery sessions, etc.

I understand and agree that all information obtained through my contacts with other clients must be kept in confidence. Furthermore, I understand that any violation of confidentiality may result in disciplinary sanctions or termination of my participation in the Day Report Center.

### III. Consent for Services

I hereby grant permission for the Tucker Day Report and its authorized representative(s) to provide non-emergency transportation services for myself.

I have read this form and certify that I understand and agree to its contents.

Client Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Title: \_\_\_\_\_