

To: [Local Authority name]

..... [Local Authority address]

Date: / /20

The Share Foundation

I/We hereby authorise you to provide to The Share Foundation (registered company number: 4500923 and registered charity number: 1108068, whose registered office is at 1st Floor, Ardenham Court, Oxford Road, Aylesbury, Buckinghamshire HP19 8HT) the following information in relation to the child/young person named below who is the beneficial owner of a Junior ISA or Child Trust Fund administered by The Share Foundation.

This authorisation shall remain in force until cancelled by me/us giving you written notice that the authorisation is revoked.

Yours faithfully

Signed: Date:

Please specify the information to be provided to The Share Foundation below

Full name of child/young person:	
Date of birth of child/young person:	
Your full name:	
Contact type : Individual carer/ foster carer/ institution/ parent /family member	
Organisation:	E-mail:
Job title:	Address:
Telephone No.:	
Mobile No.:	Town:
Fax No.:	County:
	Postcode:

Note: Apart from the full name/date of birth of the child/young person, all information is optional & please leave blank if unavailable.

Countersigned on behalf of the local authority

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For Local Authority information

Please countersign this form and forward it to

The Share Foundation, PO Box 1172, Aylesbury, Bucks HP20 9PG

By countersigning this form you are confirming that The Share Foundation may release information about the Junior ISA or Child Trust Fund held for the young person named above to the carer whose details have been completed on this form.