

Virtual Youth Program Parental Consent Form

Please complete this form to provide your consent for your child to participate in the virtual youth program.

Participant Information

Child's Full Name

Child's Age

Program Name

Program Dates

Parent/Guardian Information

Parent/Guardian Full Name

Parent/Guardian Email

Parent/Guardian Phone

Consent

☐ I hereby give permission for my child to participate in the above virtual youth program.

Additional Comments

Parent/Guardian Signature

Date

