



Exploritas Intergenerational Program

PARENTAL CONSENT FORM

Name of Child (please print)

Exploritas Student Identification #

This is to certify that I have read the description of the program as published in the Exploritas catalog and the preparatory materials provided by the Program Provider in which my child or the child for which I serve as guardian will be a participant. I approve of the child's participation in this program and hereby give my consent for him/her to attend and take part in this program under the supervision of the responsible adult(s) noted below. I also authorize the adult participant(s) to make all necessary decisions regarding the child during the program including those in the event of a medical or other emergency.

Adult Participant Name — One (please print)

Exploritas Student Identification #

Adult Participant Name — Two (please print)

Exploritas Student Identification #

Name of Authorized Parent(s) or Guardian(s) (please print)

Day Telephone Number/ Evening Telephone Number/ Alternate Telephone Number

Signature of authorized Parent(s) or Guardian(s)

Date

You received 2 copies of this form. One copy must be signed by the parent or guardian and returned together to the Program Provider with the Child Companion's Health and Safety form. We also suggest that the Adult Exploritas participant carry a signed copy while traveling.