Parent Authorization/Consent Form

Student’s name: ___________________________________________________________

Parent/guardian: ___________________________ Day phone: _____________________ From_____ to_____

Parent/guardian: ___________________________ Day phone: _____________________ From_____ to_____

Contacts, in case of emergency and guardian not available:

Name:_________________________ Relationship:_________________________ Phone:_________________________

Name:_________________________ Relationship:_________________________ Phone:_________________________

Authorized pick-up people (including parents/guardians) are:

1) __________________________ 2) __________________________ 3) __________________________

4) __________________________ 5) __________________________ 6) __________________________

In the event of any emergency when the above listed people are not able to pick up the child, please call Mike Daku. Please do not send anyone to pick up the child whom the child will not recognize.

Authorization for child to walk/bike home
My child has permission to leave the Law and Order Camp and walk/bike home without adult supervision. I understand that UAF and UAF staff are not responsible for my child’s safety after this time. Walkers/bikers are not allowed to leave the site before 4 p.m. unless a signed note has been sent.

Parent/guardian signature:____________________________________________ Date:_________________________

Parent/Guardian’s Consent
I/We have read and understand the information presented in this packet. I/We give permission for my/our child to attend the Law and Order Camp and participate in all phases of the camp. I/We are aware that some of the activities included in the program. I/We agree to cooperate with all Academy procedures and regulations. My/Our child may be photographed and pictures may be used for publicity purposes.

Parent/guardian signature:____________________________________________ Date:_________________________

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