



Parent or Guardian (Signature/Relation) \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian (Signature/Relation) \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Parent(s) or Guardian(s) \_\_\_\_\_

Printed Name of Participant \_\_\_\_\_

Address of the Participant \_\_\_\_\_

Name of the Organization \_\_\_\_\_