



Parental Consent Form

No.

Parental Consent Form

Name of Student Organization:	Name of Student Organization:
Name of Activity:	Name of Activity:
Nature of Activity: Co-Curricular	Nature of Activity: Co-Curricular
Venue: Inclusive Dates:	Venue: Inclusive Dates:
I allow my son/daughter to attend the activity. I trust that the organizers of this activity will take due diligence to ensure the safety of my son/daughter as a participant.	I allow my son/daughter to attend the activity. I trust that the organizers of this activity will take due diligence to ensure the safety of my son/daughter as a participant.
I do not allow my son/daughter to attend the activity.	☐ I do not allow my son/daughter to attend the activity.
Name of Student:	Name of Student:
Name of Parent/Guardian:	Name of Parent/Guardian:
Phone/Cell phone number:	Phone/Cell phone number:
Address:	Address:
Signature:	Signature:

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