



MousePaw Media
Parent or Guardian Consent Form

We recommend learning more about the MousePaw Media Internship Program at <https://mousepawmedia.com/internships>. If you have any questions, please contact us at internships@mousepawmedia.com.

Date: _____

Full Name of Parent or Guardian: _____

Relationship: ☐ Parent ☐ Guardian

Email Address: _____

Mobile Phone: _____ Home Phone: _____

Work Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

I give consent for _____ to interview for the MousePaw Media Internship Program online, and, should they be successful, to be granted an internship.

If your child or dependent is granted an internship, you will be required to cosign the internship contract with him/or in front of a notary.

Parent/Guardian Signature

Date

☐ I wish to receive further communications from MousePaw Media about my children's or dependent's internship at MousePaw Media should he/she be granted an internship. *(If you do not tick this box, you will still receive an email confirming his/her internship if granted, but will not receive any further communication)*