

Parental or Guardian Consent Form

Parent or Guardian Contact Information

Given name/s _____

Family name _____

Relationship to child _____

Address _____

_____ Postcode _____

Telephone (home) _____ (work) _____

Mobile _____ Email _____

Secondary Contact

Nominated contact person – Please provide details of another person who may be contacted by the child or the child's employer if the child's parent or guardian cannot be reached.

Name of nominated contact person _____

Address _____

_____ Postcode _____

Telephone (home) _____ (work) _____

Mobile _____ Email _____

Concent

I _____ hereby acknowledge that _____
is under the age of 19 and has my full permission to volunteer with the Lunenburg Folk Harbour
Society for the remainder of 2017.

Date: _____

Signature: _____