

# Youth Group

PARENT/GUARDIAN CONSENT FOR YOUTH UNDER 12

I give consent for my dependent identified below to participate in a youth group hosted by Foundry Comox Valley.

Name of Parent/Guardian

\_\_\_\_\_

*(Please print)*

Name of dependent

\_\_\_\_\_

*(Please print)*

Birthdate of dependent

\_\_\_\_\_

*(Month/Day/Year)*

\_\_\_\_\_

Signature of Parent/Guardian

\_\_\_\_\_

Date

Operated by

**JohnHoward**  
The John Howard Society of North Island

