



Parent Consent Form

2019-2020 School Year

Student(s) Information:

Name and Grade: _____

Parent(s) or Legal Guardian Information:

Name and Cell Phone #: _____

Emergency Contact other than Parent:

Name and Cell Phone #: _____

I _____ (parent(s)/legal guardian(s) do hereby give permission for my child, to attend and participate in the activities sponsored by West Harpeth Christian Tutorial.

We authorize an adult, in whose care the minor has been entrusted, to consent to any x-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment, and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or specified hospital. The undersigned shall be liable and agrees to pay all expenses to any and all medical services rendered and/or for the child to return home due to medical reasons. The undersigned will pay for all transportation costs. The undersigned does hereby agree that my child may ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in activities sponsored by West Harpeth Christian Tutorial.

Parent Signature: _____ Date: _____