



## Parental Consent Form for Student Registration

(Required for children under 13)

Name of Child \_\_\_\_\_

Child's E-mail Address \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_

Child's School \_\_\_\_\_  
(If participating through school program)

Child's Teacher \_\_\_\_\_  
(If participating through school program)

Parent/Guardian Name \_\_\_\_\_

Parent/Guardian E-mail Address \_\_\_\_\_

Parent/Guardian Street Address \_\_\_\_\_

**Check one in each of the following statements:**

I have reviewed and understand the online privacy protection policy available at: <http://4empowerment.com/privacy.php>

Yes \_\_\_\_\_ No \_\_\_\_\_

I consent to the collection, use and maintenance of personal information about my child for use with 4empowerment programs.

Yes \_\_\_\_\_ No \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_