

**PARENTAL CONSENT FORM**

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

Parent's Name \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home Phone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_

*(Please list any other phone number, where you can be reached easily on the weekend.)*

I, \_\_\_\_\_, the mother/father of \_\_\_\_\_, state as follows and declare that:

I hereby grant my son/daughter, who is a minor, and who is in my custody and/or guardianship,

**PERMISSION** to attend the **TERRES RISING LLC**, Live-Action Role-Playing event, currently scheduled to be held from \_\_\_\_\_ 200\_\_, at approximately 8:00 pm, to \_\_\_\_\_ 200\_\_ at approximately 2:00 pm.

I acknowledge that neither the employees/volunteers involved in the event, nor the employees/volunteers running the event, shall have any responsibility or liability as to the safety or well-being of my child. My child shall be free to attend the event or depart the event, at any time of their choosing. My child is responsible for his/her own travel arrangements. Attendance of my child at this event shall not be construed to be a day-care arrangement, or any form of guardianship whatsoever, by any volunteers involved in the event, or any volunteers running the event, notwithstanding the fact that meals will be supplied.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINT NAME