

# Parent Authorization Template for Extracurricular Activities

Student Name:

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Grade / Class:

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Activity Name:

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Activity Date(s):

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## Parent/Guardian Information

Parent/Guardian Name:

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Contact Number:

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Email:

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## Medical Information (Optional)

Allergies/Medical Conditions:

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Emergency Contact Name:

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Emergency Contact Number:

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## Authorization

I, the undersigned, authorize my child to participate in the above-named extracurricular activity. I understand the nature of the activity and accept full responsibility for my child's participation. I have provided necessary health and emergency information above.

Parent/Guardian Signature:

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Date:

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