



Parent Consent Form for Summer Staff Position

Parents must give consent for their minor child before the child can serve with InFaith in the Summer Staff Program.

General Information

Child's Name: _____ Social Security #: _____

Date of Birth: _____

Parent's Name: _____

Address: _____

City/State/Zip: _____

Phone #: _____

My signature below indicates that:

I understand that my child (name) _____ has applied to participate in the InFaith Summer Staff Program for (year) _____. I understand this is a seasonal position only.

I have read and understand the Summer Staff Financial FAQ sheet (available at infaith.org/summerstaff/financial-faqs), which explains the funds our summer staff raise and how/when they are paid.

(Signature)

Date

(Print Name)

Please note: You must save the completed version to your hard drive (rename it Parental Consent Form followed by the first initial and last name of applicant) before uploading the document.

An unsaved document, when uploaded, will be received blank.