



National Take a Stand Festival 2017 Parent/Guardian Consent Form

I hereby acknowledge that, if selected, _____ (*print student's name*), has my permission to participate in the National Take a Stand Festival from July 15 – 22, 2017. I have read all the materials (including the Frequently Asked Questions) related to this opportunity and understand that all components (food, lodging, programming, airfare*, and ground transportation) will be paid for and booked by the National Take a Stand Festival organizers (**note that all students travelling by air will require a government issued photo ID to travel*). I also understand that selected students will attend without accompaniment from a parent or program director/teacher from their program.

Authorizing Parent/Guardian #1:

Parent/Guardian Name: _____

Parent/Guardian Relationship to Student: _____

Parent/Guardian Signature: _____

Date Signed: _____

Authorizing Parent/Guardian #2 (if applicable):

Parent/Guardian Name: _____

Parent/Guardian Relationship to Student: _____

Parent/Guardian Signature: _____

Date Signed: _____

Applicants: Please upload the signed version of this document on the Acceptd platform. Please email questions to yola@laphil.org. While email is preferred, we are also available by phone at 213.972.3421.

