

# Youth Action Kalamunda

## Under 18 Parent Consent Form

Involvement in Youth Action Kalamunda (YAK) requires a degree of commitment from participants. I support my child/ child-in-care to take part in YAK meetings and associated activities.

I give permission for my child/ child-in-care to be photographed by the City of Kalamunda and understand that these photographs may be used for reporting and publicity purposes.

I agree to let my child/ child-in-care participate in YAK meetings, programs and community events. I also agree to read and understand the rules and information regarding my child's/ child-in-care's participation in YAK when they receive this information on their first meeting.

<b>Applicant name:</b>	
<b>Parent/ Guardian name:</b>	
<b>Relationship to applicant:</b>	
<b>Emergency contact number:</b>	
<b>Parent/ Guardian signature:</b>	
<b>Date:</b>	