

ARIZONA CONFERENCE YOUTH AND CHILDREN'S MINISTRIES

Consent Form for Working With Children Online

Arizona Conference of 7th-day Adventists Youth and Children's Ministries Parental Permission Form for Minor's Online Participation in Name of Minor (print legibly):______Minor Grade Level: _____ Parent/Guardian Name: Phone: (______) _____ Contact Number #2: (_____) Email Address: _____ Address: Please check below to indicate the participation of minor identified above. _____I do give permission for the minor to participate in this even/activity with the Sponsoring Entity. _____I do not give permission for the minor to participate in this event/activity with the Sponsoring Entity. (If you choose for the minor NOT to participate, the minor will not be able to participate at all. Parent/Guardian Signature: _______Date: ______ Parent/Guardian Name Printed: Further, I/we understand by agreeing to allow the minor to participate that the Online Activities identified above involve certain risks such as exposure to bullying, pornography, misappropriation of personal information and other risks associated with online activity. In addition, the Sponsoring Entity stated above cannot guarantee that participation in this online activity will not expose your hardware to viruses, and other malicious software or codebased tools. I/we still wish to proceed with the activities described herein I/we do so and assume all risk and understanding of the risks involved. I/we fully understand that the sponsoring organization cannot fully protect me, my child, or my computer systems, including software and hardware. Any technical support for my computer systems, the use of any software on my computer systems or accessed through the internet are my sole responsibility. I understand that supervision of what my child accesses online, the information they share, and any messages with volunteers, employees, other parents and other minors are my responsibility. I agree to fully supervise all activities the minor participates in and to screen and assume responsibility for all messages my child sends and receives. I have read and understand the foregoing. _____Initials

Please return this form to Arizona Conference of 7th-day Adventists Youth Ministries. Scan and email as an attachment to gcorella@azconference.org