



Youth Leadership Academy Training



Parent/Guardian Consent Form

*This form **must be signed** by the student's parent or guardian. Complete one form for **each** student. Attach the signed form as a **PDF document** to the YLA application.

Full name of the student's parent or guardian: _____

Parent/guardian relationship to the student: _____

By signing below, I confirm that I approve

Student's full name: _____

to participate in the Virtual Youth Leadership Academy Kick-Off Event hosted by Montana GEAR UP and Paradigm Shift on Zoom September 14-18, 2020.

To the maximum extent by law, I agree to defend, indemnify and hold harmless Montana GEAR UP and its employees, directors, and designees for expenses relating to injuries, accidents, disease, property damage and/or property loss which may occur as a result of this student's participation in the 2020 PARADIGM SHIFT/GEAR UP Youth Leadership Academy Training.

I am aware that the hazards associated with participation in the Youth Leadership Academy are minimal. Knowing that there are risks that may present themselves, I give my permission for my child (or the child I am the guardian of) to participate in the Youth Leadership Academy virtual training and to be transported to any future Youth Leadership Academy Training activity should travel restrictions due to Covid-19 be lifted. I also authorize any necessary interventions to be administered to the above-named student ased on physical or mental health needs.

Date:

Parent/Guardian Signature:
