

PARENT/GUARDIAN CONSENT FORM

I, _____, am the parent or legal guardian
of _____ and I am informed of the activities
offered by Calvary Baptist Academy/Mother's Day Out located at: 177 West Klein
Road, New Braunfels, Texas.

As the parent or legal guardian of my child, I hereby consent for my child to attend
and participate in all activities provided by CBA/MDO.

(SIGNATURE OF PARENT OR GUARDIAN)

Additional Information:

Phone number where I can be reached in case of an emergency: _____

Name and phone number of alternate contact person if I cannot be reached:

(Name)

(Number)

(Relationship)

Any known allergies: _____
