

Parental/Guardian 4-H Overnight Sleeping Room Rule Consent Form

Authorization to Consent to Alternative Overnight Sleeping Room Rule

I, _____, of _____ County, am the custodial parent having legal custody of _____, a minor child, age _____, born _____. I authorize my child to be assigned an overnight sleeping room in one of the following options: (Initial the authorized option)

_____ Option 1: The parent/guardian may sign a consent form for a youth under the age of 18 years of age to stay in a room alone. This form must be signed by the County 4-H Agent, County Director, and witness unrelated to the youth, parent or guardian.

_____ Option 2: The parent/guardian may sign a consent form for a youth to be assigned an overnight sleeping room with an unrelated adult of the same gender. This form must be signed by the County 4-H Agent, County Director, and witness unrelated to the youth, parent or guardian.

_____ Option 3: The parent/guardian may sign a consent form for youth to room with another youth that is more than three years older or younger. This form must be signed by the County 4-H Agent, County Director, and witness unrelated to the youth, parent or guardian.

Custodial Parent Signature _____ Date_____

County 4-H Agent Signature _____ Date_____

County Director Signature _____ Date_____

Witness Signature _____ Date_____