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PARENT CONSENT FORM

SIUDENI	
FULL NAME:	
PHONE:	
EMAIL:	
DATE OF BIRTH: (YYYY-MM-DD)	

MOTHER'S INFO

FULL NAME:			
PHONE:			
EMAIL:			
DATE OF BIRTH (YYYY-MM-DD)	:		
ADDRESS:			

FATHER'S INFO

FULL NAME:	
PHONE:	
EMAIL:	
DATE OF BIRTH (YYYY-MM-DD)	:
ADDRESS:	

I have read and fully understand the admission agreement, agree to be bound by it and give consent to

(name of the student)

to attend the online courses and educational activities designed by Royal Canadian High School.

PARENT/GUARDIAN'S SIGNATURE:

DATE: