RISE Parent/Guardian Permission Form

I,, the parent or legal guardian of give permission for my child to participate.		ordian of
		nild to participate in
the RISE Summer Program at t	the Lerner Research Institute fr	om May 31, 2022
through August 5, 2022. My chi	ild and I agree that he/she will o	commit to working 40
hours a week for the full 10 wee	eks if accepted into the progran	n.
Parent/Guardian's Signature:	;	Date
Parent/Guardian's Name:		
Phone Number:		
Child's Signature:	Date	
Child's Name:		
Phone Number:		