



MentorMe Virtual Mentoring Program PARENT/GUARDIAN CONSENT FORM

I, the parent or legal guardian for _____ hereby give my permission for my child to participate in the MentorMe Virtual Mentoring Program – Summer 2021 Edition.

I fully understand that the program involves mentors, who shall be selected from the community at the program facilitators' discretion based on their professionalism and expertise. Appointed mentors will be scheduled to briefly join a group session and/or live event throughout the 4-week experience.

I understand that my child and I are expected to participate in a virtual orientation session that will provide more details about the program. I further understand that I will be expected to obtain all required materials prior to the start of the mentoring experience.

I understand that my child is expected to display proper etiquette online and during the live events that may take place.

Failure to comply with program requirements will result in all fees being forfeited (no refunds) and the child being removed from the program.

I understand that during the course of the mentoring program there may be two live group events and/or family events planned. I understand that the program staff will monitor all activities to the best of their ability and within reason during this time. Transportation to and from these events (including timely drop off and pick up where applicable), along with any related costs will be the responsibility of the parent/guardian. While every effort will be made to follow CDC guidelines, the program will not be held liable for any COVID-related incidents that may occur.

I give the MentorMe Mentoring Program Facilitators permission to review my child's academic and attendance records from their school for the 2020-2021 academic year as a part of the mentoring process.

I understand that participants will be using online resources and that personal journaling will be a consistent part of the process. Every effort will be made to allow my child to actively engage in this activity in a private, confidential manner.

I further understand that this mentoring experience does not replace any mental health services that may be needed. I also understand that the staff of the MentorMe Program are required by law to report any suspected abuse or threat of harm involving minors or vulnerable adults.

I permit the mentoring program staff to utilize photographs/audio/video recordings of my child obtained during their involvement in the mentoring program and waive all rights of compensation.

I agree to the above terms and conditions of the MentorMe program.

(Signature of Parent/Guardian)

(Printed name of Parent/Guardian)

Date _____