

PARENTAL CONSENT AND WAIVER FORM

Georgian International Foundation for Transformation, Inc. (Ertoba)

Minor's Information

- Full Name: _____
- Date of Birth: _____
- Address: _____

Parent/Guardian Information

- Full Name: _____
- Relationship to Minor: _____
- Phone Number: _____
- Email: _____

Consent and Waiver

I, the undersigned, am the parent or legal guardian of the minor listed above.

- I give permission for my child to volunteer with Ertoba and participate in its programs, activities, and events.
- I understand my child will be assigned to age-appropriate activities under supervision.
- I release and hold harmless Ertoba, its officers, directors, staff, and volunteers from any liability, claims, or demands that may arise from participation.
- I consent to photographs or videos of my child being used for nonprofit purposes (publicity, reports, website, social media).
 - ☐ Yes ☐ No

Emergency Contact

- Name: _____
- Phone Number: _____

Signatures

Parent/Guardian Signature: _____ Date: _____

Minor's Signature (if 14 or older): _____ Date: _____