

**THE LUTHERAN COLLEGIATE BIBLE  
INSTITUTE**

**Parent/Guardian Consent Form  
for Student Extra-Curricular Activities**

Extra-Curricular Activity for which consent is granted: \_\_\_\_\_

Date for this activity: From \_\_\_\_\_ to \_\_\_\_\_

Name of the Student wishing to participate: \_\_\_\_\_

Relationship of person(s) giving permission to attend: \_\_\_\_\_

As parent/guardian I hereby give permission to \_\_\_\_\_  
Student's Name  
to participate in the activity as indicated above.

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Signature of Parent or Guardian

Dated \_\_\_\_\_