Parent/Guardian Consent Form
Individual

Note that one parent/guardian consent form must be printed and signed for each student.

Student Information

In this document, “the student” refers to:

Last name: ___________________________________ First name: __________________________

Girl ID: ______________________________________

Consent Information

The student has my permission to participate in the Expanding Your Horizons conference at Cornell University on April 28, 2018:

☐ Yes

Photographs and videos of the student may be used by EYH for promotional and display purposes:

☐ Yes  ☐ No

The student may be transported in a mini-van/bus (required for off-campus workshops):

☐ Yes  ☐ No

In the event of an emergency, EYH will use the emergency contact information submitted with the student’s online registration. Please notify us by email at CornellEYHreg@gmail.com if the emergency contact information is incorrect.

Signature of Parent/Guardian: _____________________________________________________________

Print Name: ___________________________________________ Date: __________________________

Please mail this form and check payment to EYH at the address below. Checks should be made out to Cornell University. Alternatively, you can pay online using the link in the full registration e-mail. Please be sure to include your girl ID number and full name with all payments. If you are paying by credit card or if you requested a scholarship, do not enclose a payment.

**PAYMENT AND SIGNED CONSENT FORMS ARE DUE BY MARCH 30, 2018**

EYH Registration Fees
PO Box 6884
Ithaca, NY 14851

Thank you for registering for EYH! We look forward to seeing you in April.