Parental Consent Form



**1705 RCACC 250-503-1705**

**PARENTAL PERMISSION FOR A PROPOSED TRAINING ACTIVITY**

**Exercise:** **Army Cadet League Shoot**

**Eligible Cadets – all**

**Date:** 19 Jan – 20 Jan 2019

**Cadet Drop Off:** G20 – 19 Jan 19 0900 hrs

**Cadet Pick Up:** G20 – 20 Jan 19 1400 hrs

OIC: Capt Brunskill

OPI:

1. I, the undersigned, parent/guardian of Cadet \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, state my cadet **will/will not**

Cadet Rank, Initial, Surname circle one

be attending the above exercise. **Medical care card #** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. I understand if this status changes my cadet is to notify the Officer in Charge (OIC).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature Date

Brunskill ML

Capt