

**MICHIGAN STATE UNIVERSITY YOUTH PROGRAM  
PARENT/GUARDIAN CONSENT FORM**

I grant permission for (print participant's name) \_\_\_\_\_ to participate in all educational and social activities of the following MSU program or activity:

Program name: \_\_\_\_\_ empowHER Leadership Retreat \_\_\_\_\_

Program dates: \_\_\_\_\_ June 25, 2022 \_\_\_\_\_

MSU unit/department: \_\_\_\_\_ MSU Women's Basketball Program \_\_\_\_\_

I understand that sessions may entail field trips and/or campus facility tours. I also understand that participants may engage in athletic or other recreational activities that have special risks.

I have read the session descriptions and approve of my child's selections. I accept any risks associated with the assigned sessions and selected recreational activities.

I understand that my child has a role to play as regards his or her safety and security. I will speak with my child about the need to honor safety rules and to behave responsibly.

(Please print):

\_\_\_\_\_

(Parent or legal guardian)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_