



PARENTAL PERMISSION DOCUMENT
(For students younger than 18 years)

Please take time to read the following information carefully. Ask us if there is anything that is not clear or if you would like more information.

BACKGROUND:

Power in You focuses on the emotional aspect of life challenges and at-risk behavior in order to help teens make positive choices and have healthy attitudes on the road to adulthood and beyond. *Power in You* aims to give teens hope by providing them with inspirational stories from young adults and life improvement by directing them to numerous professional resources that will provide them with support for their challenges.

We would like permission for your son or daughter to share his or her story with the *Power in You Program*. His/her story and photo will be featured on www.powerinyou.org.

PERSON TO CONTACT:

If you have any questions, please call Audrey Smith at 801.355.3131.

VOLUNTARY PARTICIPATION:

You can choose not to consent for your child to participate in this program. If you decide that your child will take part in the *Power in You* program you will be asked to sign this consent form. This will not affect the relationship you have (if any) with your child's school.

COSTS TO PARTICIPANTS AND COMPENSATION:

There is no cost to participate in this program.

CONSENT:

I confirm that I have read and understand this consent document and have had the opportunity to ask questions. I understand that my child's participation is voluntary and that I am free to withdraw my child at any time, without giving any reason, without my

legal rights being affected. I will be given a signed copy of the consent and authorization form to keep.

Printed Child's Name

Printed Parent/Guardian's Name

Parent/Guardian's Signature

Date

Printed Name of Witness Obtaining Authorization and Consent