

NOTARIZED PARENTAL CONSENT

STUDENT

NAME IN FULL

DATE OF BIRTH

NAME OF SCHOOL CEDAR PARK CHRISTIAN SCHOOLS

FATHER

NAME IN FULL

DATE OF BIRTH

PRESENT ADDRESS

POSTAL CODE

PHONE NUMBER

MOTHER

NAME IN FULL

DATE OF BIRTH

PRESENT ADDRESS

POSTAL CODE

PHONE NUMBER

CUSTODIAN(S)/GUARDIAN(S)

NAME IN FULL

PRESENT ADDRESS

We, _____ and _____ father and mother of this said student, _____, hereby grant the full custodianship to _____ during his/her stay in the USA. The necessary arrangements for the care and support of the said student have been made in order that the custodian should act in place of the said parent.

Date signature of father

signature of mother

**OFFICIAL NOTORIAL CERTIFICATE OF THIS PARENT CONSENT
SIGNED AND SEALED BY A NOTARY PUBLIC NEEDED**