

**All students attending LTC's CareerQuest  
are required to turn in this parent/guardian approval form.**

I approve of \_\_\_\_\_'s (Child's Full Name)  
participation in the hands-on activities associated with the Career Quest Day at Lakeshore  
Technical College and give permission for my child to be photographed.

\_\_\_\_\_/\_\_\_\_\_/WI/\_\_\_\_\_  
Street Address City State Zip

\_\_\_\_\_/\_\_\_\_\_  
Phone Parent Cell Phone Number

\_\_\_\_\_  
Parent or Guardian Full Name (Please Print)

I give my full permission and approval for my child (named above) to participate  
in the hands-on activities, and I accept responsibility for his/her preparation,  
participation, and actions. I will not hold Lakeshore Technical College, staff  
members, or any of its representatives liable for any accident or injury. I  
understand that my child is expected to follow the rules or guidelines of the  
college and/or of the teacher.

In the event of a serious illness or injury to my child, I expressly consent to the  
administration of emergency medical care. These are the telephone number(s)  
which I can be reached at in the case of such an emergency:

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

Further, I authorize the high/middle school representative to act on my behalf for  
my child while participating in this activity at Lakeshore Technical College.

\_\_\_\_\_  
Parent/Guardian Signature Date