



## **Tutoring Permission Form**

Return to \_\_\_\_\_ by \_\_\_\_\_

Your child has been invited to participate in the Whiz Kids Tutoring Program. Your child will be matched with a trained tutor and will help reinforce basic math and/or reading skills once a week for 1 hour. Whiz Kids also has an optional faith component called Club Time. Your child's tutor will be emailing you that form before tutoring starts so that you can opt in or out of Club Time.

### **Student Information:**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: male / female (*circle one*) Ethnicity: \_\_\_\_\_

Known Allergies: \_\_\_\_\_

Street Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Do you have a sibling in Whiz Kids? Yes or No (*circle one*)

If yes, what is the sibling's name? \_\_\_\_\_

Name of School: \_\_\_\_\_

Grade: \_\_\_\_\_ Teacher's Name: \_\_\_\_\_

### **Parent/Guardian 1 Information:**

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### **Parent/Guardian 2 Information:**

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Emergency Contact Information:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

In which subject does your child need the most help? Math / Reading / Both (circle one)

**Please share any other information that would help us better serve your child:**

**Permissions/Consent**

I hereby give my permission for my above-named child to participate in the Whiz Kids Tutoring Program. In granting permission for my child to participate, and to ensure that my child benefits most from the program I agree to the following:

- To give Whiz Kids permission to have access to my child’s school academic records, as well as give permission for my child’s teacher to share academic and behavioral information with Whiz Kids.
- To have my child attend every tutoring session.
- To communicate any concerns regarding my child’s participation in the program to the Whiz Kids office, and to respond to communications from the staff in a timely manner
- To having my child's image used free of charge in promotional publications and social media postings without any identifying- information tied to their image. *Please circle if you prefer not to have your child's image used.*
- To allowing my child to receive links to online meetings that are part of Whiz Kids' Summer Tutoring Program.
- I agree that the services provided by Whiz Kids are free and that they utilize trained volunteers.
- I waive and release all claims for damages that I may have against Whiz Kids Tutoring and its personnel.
- I also agree that if my child or any other person having custody or guardianship of my child should make any claim against Whiz Kids Tutoring for damages resulting from this activity, I will personally indemnify, defend and hold harmless Whiz Kids Tutoring and its personnel, against any losses, costs, fees or damages of every type.

Parent/Guardian Signature: \_\_\_\_\_

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