Parental/Guardian 4-H Overnight Sleeping Room Rule Consent Form

Authorization to Consent to Alternative Overnight Sleeping Room Rule

I, _______________________________________, of Carteret County, am the custodial parent having legal custody of __________________________, a minor child, age ________, born _______________________________. I authorize my child to be assigned an overnight sleeping room in one of the following options: (Initial the authorized option)

________ Option 1: The parent/guardian may sign a consent form for a youth under the age of 18 years of age to stay in a room alone. This form must be signed by the County 4-H Agent, County Director, and witness unrelated to the youth, parent or guardian.

________ Option 2: The parent/guardian may sign a consent form for a youth to be assigned an overnight sleeping room with an unrelated adult. This form must be signed by the County 4-H Agent, County Director, and witness unrelated to the youth, parent or guardian.

________ Option 3: The parent/guardian may sign a consent form for youth to room with another youth that is more than three years older or younger. This form must be signed by the County 4-H Agent, County Director, and witness unrelated to the youth, parent or guardian.

Custodial Parent Signature ____________________________ Date_______

County 4-H Agent Signature ____________________________ Date_______

County Director Signature ____________________________ Date_______

Witness Signature ____________________________ Date_______

Approved as of: 5/26/06