

PECOS-BARSTOW-TOYAH INDEPENDENT SCHOOL DISTRICT
SCHOOL CONSENT FORM

Name of Adult _____

Address _____

Telephone _____

(Additional names may be listed on the back.)

This document applies to the following minor child(ren):

Name	Age	Date of Birth
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Name	Age	Date of Birth
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Name	Age	Date of Birth
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I authorize the above named adult to act for me, as my attorney, in any matter requiring my consent or signature in all school related matters affecting the minor(s). I hereby agree to waive all claims and hold harmless the District, its officers and employees from all claims arising from their reliance on this consent form.

I understand that this is not a grant of legal guardianship (which only a court may grant).

Signed this _____ day _____, _____.

Signature of Parent

Signature of Parent

THE STATE OF TEXAS
COUNTY OF _____

Before me, a Notary Public, on this day personally appeared _____
known to me (or proved to me on the oath of _____) to be the
person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she
executed the same for the purpose and consideration therein expressed.

Given under my hand and seal of office this _____ day of _____, A.D. _____.

Notary Public, State of Texas

Print name of Notary Public