

**ANNUAL CONSENT FOR**  
**IN-PROGRAM LODGING: ADULT PARTICIPANT AND MINOR ATHLETE**



I, \_\_\_\_\_, as the parent/legal guardian of \_\_\_\_\_, a minor athlete, hereby authorize and consent that \_\_\_\_\_, an Adult Participant, who is not a coach, can share lodging arrangements with said minor athlete for all in-program lodging related to Northridge Area Swimming Association for one year from the date of this consent. I understand that said Adult Participant will **NOT** share a hotel room or otherwise sleep in the same room with said minor athlete and all interactions will be observable and interruptible.

I am aware that I can withdraw consent at any time.

Parent/Legal Guardian Name Printed: \_\_\_\_\_

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

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

**CONSENT FOR**

**IN-PROGRAM LODGING: ADULT PARTICIPANT AND MINOR ATHLETE ON SPECIFIC  
DATES**



I, \_\_\_\_\_, as the parent/legal guardian of \_\_\_\_\_, a minor athlete, hereby authorize and consent that \_\_\_\_\_, an Adult Participant, who is not a coach, can share the lodging arrangement with said minor athlete for all in-program lodging arrangements related to Northridge Area Swimming Association during the occasions detailed below. I understand that said Adult Participant will **NOT** share a hotel room or otherwise sleep in the same room with said minor athlete and all interactions will be observable and interruptible.

Date	Event/Occasion Name	Location

I am aware that I can withdraw consent at any time.

Parent/Legal Guardian Name Printed: \_\_\_\_\_

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

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

**CONSENT FOR**  
**IN-PROGRAM LODGING: CLOSE-IN-AGE EXCEPTION ON SPECIFIC DATES**



I, \_\_\_\_\_, as the parent/legal guardian of \_\_\_\_\_, a minor athlete, hereby authorize and consent to \_\_\_\_\_, an Adult Participant that is no more than four years older than said minor athlete; with **NO** authority over said minor athlete; **TO** share a hotel room or otherwise sleep in the same room with said minor athlete for in-program lodging arrangements related to Northridge Area Swimming Association during the occasions detailed below.

Date	Event/Occasion Name	Location

I am aware that I can withdraw consent at any time.

Parent/Legal Guardian Name Printed: \_\_\_\_\_

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

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