School Registration Consent Form

Date: _____

To Whom It May Concern,

I, the undersigned, hereby give my consent for my child, [Child's Full Name], to be registered for the upcoming academic year at [School Name].

I understand that by signing this consent form, I am allowing the school to process my child's registration and related information as required.

| Parent/Guardian Name: |
|--|
| Relationship to Child: |
| Signature: |
| Date: |
| Contact Information: |
| Phone Number: |
| Email Address: |
| Thank you for your attention to this matter. |
| Sincerely, |