

HAMMOND

summer programs

CONSENT FORM

Junior Counselor Leadership Program 2026

(This form must be completed by applicant's parent/guardian.)

I feel that my son/daughter has the maturity, responsibility, and dedication to be a Hammond Junior Counselor. I hereby acknowledge reading all the informational packet and application, including the section completed by my son/daughter, and confirm that all the information is accurate and true. I agree to all the Junior Counselor Program policies, procedures, and application fees. I understand that failure to comply with the policies will result in dismissal from the program.

Parent/Guardian Signature

Date

I give my consent for my child's participation in the Junior Counselor Leadership Program. I agree to release and hold harmless the School, its agents and employees from claims, damages, losses, or other liabilities for injuries to the Student not from gross or willful negligence by the School, its agents or employees. I agree to indemnify the School for damage caused by the Student. I will not hold the School responsible in the case of accident or injury as a result of participation. I have read, understand and agree to all policies and billing information for the Junior Counselor Program.

Parent/Guardian Signature

Date