



Parental Authorisation to remove curfew

I, _____, parent of, _____,
 participant to the Explore Program, _____, authorise my child not to respect the curfew schedule (11pm during the week and 1am on weekends) established by Glendon College, York University.

I am aware that when my child is off campus, I will be responsible, and hence, my child will be under my responsibility, and not under the responsibility of the Explore Program. I am also aware that when my child will go off campus, he or she will need to be with at least two other students, and never alone.

Signature of parent:

Date:

Signature of child:

Date:

Parental Authorisation to leave campus alone

I, _____, parent of, _____,
 participant of the Explore Program, authorise my child to go off campus alone. I will be responsible if anything happens.

Signature of parent:

Date:

Signature of child:

Date:
