

AmericanThai.net
PARENT/GUARDIAN CONSENT FORM

INSTRUCTIONS:

Please review, print out and complete the information below. Sign your name at the bottom of the form and fax it to AmericanThai.net at 1-401-789-7686. When AmericanThai.net receives and processes your consent form, we will activate your child's account. If you have additional questions, please feel free to call us at 1-401-789-7686 or e-mail: drjoy@americanthai.net.

I, _____ PARENT/GUARDIAN CONSENT
(First Name & Last Name)

OF _____ BIRTH DATE: _____
(Child/Youth First Name & Last Name) (dd/mm/yyyy)

GIVE CONSENT TO AN AUTHORIZED **AmericanThai.net** REPRESENTATIVE TO:

1. TAKE MY CHILD/YOUTH PHOTOGRAPH(S)/PICTURE(S)
2. USE OF THE PHOTOGRAPH(S)/PICTURE(S) OF MY CHILD/YOUTH FOR RELEASE TO MEDIA OR IN COOPERATE WITH **AmericanThai.net** WEBSITE.

DISCLOSURE of information in voluntary and data required by the Privacy Act, however, no information disclosed outside AmericanThai.net Associates.

This consent form will be maintained by AmericanThai.net Associates. Please notify AmericanThai.net Associates in writing if you are no longer wish to participate.

_____ Parent's Signature

_____ Date