2019 CONSENT FORM.
PARTICIPANTS AGED 16-17 YEARS.

Parent/Guardian Consent form

For all participants aged 16-17 years, your parent and or guardian consent is required for you to participate in the NSW Aboriginal Knockout Health Challenge.

By signing this form, you agree to the following conditions.

I agree for ________________________________ [participant's name] to take part in the NSW Aboriginal Knockout Health Challenge, and agree that their participation and weight data will be collected and used by or on behalf of NSW Health and their agencies for the purposes as described in the “Important Information” above.

*Parent/Guardian Name: ________________________________

*Parent/Guardian Signature: ________________________________

*Date: ________________________________