

Parent Authorization Form for Overnight Stay

This **parent authorization form** sample is designed to grant permission for an overnight stay, ensuring safety and clear communication. It includes essential details such as the child's information, guardian consent, emergency contacts, and special instructions. Utilizing this form helps organizers and caregivers provide a secure environment during extended stays away from home.

Child Information

Child's Full Name:

Age:

Parent/Guardian Information

Parent/Guardian Name:

Phone Number:

Email:

Overnight Stay Details

Location/Address of Overnight Stay:

Date From: Date To:

Organizer/Caregiver Name:

Emergency Contact

Emergency Contact Name:

Phone Number:

Relationship to Child:

Special Instructions/Medical Conditions

Please provide any allergies, medications, or special instructions:

Authorization & Consent

I, the undersigned parent/legal guardian, hereby authorize my child to participate in the described overnight stay and confirm the information provided above is accurate. In case of emergency, I consent for the organizer/caregiver to obtain medical attention for my child as necessary.

Parent/Guardian Signature:

Date:

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