

**Pasadena City College
PCC Extension
Release & Medical Consent Form**

**This form must be returned with your class
registration form if you are under 18 years of age.**

I grant approval for my child _____ Age _____ Grade Level _____
Date of Birth _____ to participate in youth classes and release PCC Extension and any instructors and
assistants from any liability arising from his/her participation in said classes. I understand PCC Extension does not
provide health or medical insurance for participants. Consent is hereby given to the PCC Extension instructors or
supervisors to give or seek medical aid required in the case of emergency.

- No credit or grades given for these courses
- Extended Learning does not provide escort service for children.
- Remind your children to speak and behave quietly in the hallways. There are other classes in session.
- Young children should not be dropped off in the parking lot.

I understand that each youth class is designed for a specific grade level. I certify that I have enrolled my child in the
appropriate grade level.

Parent Guardian Signature:

_____ Date _____

Parent's Name (print): _____

Phone: (_____) _____

Name and Phone of additional person who may be contacted in case of emergency:

Please complete and return this form to the instructor on the first day of class.