



Bereaved Families of Ontario - Halton/Peel
We are the bereaved helping the bereaved learn to live with grief

CONSENT FORM

I, _____ parent/guardian of _____ give
consent for my child under 17 years of age to attend:

Expressive Art Summer Camp
For any sessions in July or August

At

Bereaved Families of Ontario – Halton/Peel
33 City Centre Drive, Suite 610
Mississauga, ON L5B 2N5

Emergency Contact Name + Phone Number: _____

Name of Parent/Guardian
(please print)

Name of Parent/Guardian
(signature)

Date: _____