

PARENTAL CONSENT FOR MARKSMANSHIP TRAINING

We request that our son/daughter \_\_\_\_\_ be permitted to participate in MCJROTC Marksmanship Training. We grant our consent with knowledge that the training will involve the firing rifles. We understand that we may arrange to visit the range facilities and acquaint ourselves with procedures and safety precautions.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Home Address

\_\_\_\_\_  
Telephone Number (Home)

\_\_\_\_\_  
Telephone Number (Work)

\_\_\_\_\_  
Telephone Number (Mobile)