

UNDER 18 PARENT/GUARDIAN CONSENT FORM

Please complete and return to your HIA Training Coordinator.

SECTION A - PERSONAL DETAILS

Student's Full Name: _____

Address: _____

_____ Postcode: _____

Phone: BH/Mobile: _____ Home: _____

E-mail address: _____

Parent or Guardian's Full Name: _____

Address: _____

_____ Postcode: _____

Phone: BH/Mobile: _____ Home: _____

E-mail address: _____

SECTION B – COURSE DETAILS

Course Title and Start Date: _____

SECTION C – DECLARATION

I have read HIA's Student Information Kit* and give my consent for the above named student to attend the HIA Training course they have enrolled for:

Parent or Guardian's signature: _____

Date: _____

I have read HIA's Student Information Kit*:

Student's signature: _____

Date: _____

* The Student Information Kit is available from HIA's web site (www.hia.com.au, then select "Training" and then "Enrolment Information" from the Navigation Pane) or on request to the HIA Training Coordinator.