

Your signature at the bottom of this form indicates your agreement to the following:

- 1. I grant permission for my child to have the opportunity to be matched with a mentor in the REACH One Mentor Program.
- 2. I am aware that REACH One does not have an obligation to match my child with an adult volunteer.
- 3. I will encourage my child to participate in the weekly meeting with his/her match either BEFORE/AFTER school.
- 4. I understand that there will be no contact between my child and the mentor outside of school, until certain requirements are met and ONLY after my approval.
- 5. I authorize the release of information from my child's teacher, child-specific staff, or principal regarding my child to the mentor matched with my child.
- 6. REACH One has my permission to release information to a prospective mentor which would help the prospective mentor decide whether they would be a good match for my child.
- 7. I understand that cooperation among the School, mentor, myself, and my child is required for the volunteer to be helpful to my child. I agree to make every reasonable effort to cooperate with the REACH One program.

Child's Name	Grade
Parent/Guardian Name	
Parent/Guardian Signature	. ————————————————————————————————————
If my child is matched, REACH Waupun has my permission to publis only to promote the REACH One program in print or online, include Facebook, and Instagram pages.	
Please Initial: Yes, you have my permission to use my child's photo	for print and online

No, I would prefer my child's photo was not published in any capacity online _____