



Kendall County Sheriff's Office
PROJECT C.A.R.E.
Consent form

Participant's Name _____ D.O.B. _____

I, _____ parent or guardian of the above participant, do hereby give consent for my child to attend the Kendall County Sheriff's Office Project C.A.R.E. Program. I give consent for my son/daughter/grandchild to attend and participate in every aspect of the program to include, but not limited to: presentations from the Kendall County Sheriff's Office personnel, Kendall County Juvenile Probation personnel, Boerne Police Department personnel, and Fair Oaks Ranch Police Department personnel. I do hereby release Kendall County and its affiliates from any liability involved while participating in the Project C.A.R.E. Program.

Parent / Guardian Signature

Date