



# NON-CURRICULUM-RELATED STUDENT CLUBS PARENT PERMISSION FORM

STUDENT NAME:

STUDENT ID:

GRADE LEVEL:

NAME OF CLUB:

SCHOOL: **KLEIN HIGH**

FACULTY SPONSORS:

	FACULTY NAMES
1.	
2.	
3.	
4.	

PURPOSE OF THE CLUB:

HOSA is an instructional program that provides recognition, leadership, scholarships, networking, and connections to the healthcare industry. It also promotes career opportunities to students interested in the healthcare industry.

“The           Klein HOSA Organization           (name of club) is a non-curriculum club or organization. As such, it is not endorsed by the Klein Independent School District and a student must have written parental permission in order to participate in it. See KISD Board of Trustees Policy FNAB (local) for restrictions applicable to all non-curriculum clubs and organizations.”

**This form MUST be signed and returned PRIOR to the student being allowed to participate. Parental approval may not be obtained by telephone.**

The undersigned, being the parent or guardian of \_\_\_\_\_  
(student’s full name) does hereby consent to said student’s participation in the above-mentioned club or organization.

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

\_\_\_\_\_  
Date