## PARENTAL PERMISSION FORM

## **Site-Based Program**

I,	, give permission for my
son/daughter,	, to volunteer as a
Big Brother/Sister.	

I understand that he/she will be mentoring a child at one of the following sites on a weekly basis during the school year. My preference is: (Please check)

Amelon Elementary	Amherst Elementary	
Bedford Hills Elementary	Leesville Road Elementary	
Linkhorne Elementary	Perrymont Elementary	
Rustburg Elementary	Sandusky Elementary	
Sheffield Elementary		
(YMCA After-School Programs)		

Boys and Girls Club Jubilee Family Center

I further understand that his/her involvement in the Big Brother Big Sister Site-Based program will be under the guidance and with the support of Big Brothers Big Sisters of Central Virginia Staff who can be contacted at any time to discuss the program..

Signature of Parent

Date