

Parental/Legal Guardian Consent Form

I, _____ hereby give my consent for
Print Parent/Legal Guardian Name

_____, _____ to participate in Class D testing with NIT staff.
Print name of Minor age

I fully understand and recognize that driving can have high risk factor and give permission for my minor to train/test with NIT staff.

If my personal vehicle is being used, I understand it is my responsibility to maintain insurance and registration for that vehicle.

I release Northern Industrial Training, LLC (NIT) from all liability and responsibility.

Signature of Parent/Legal Guardian

Date

NIT Representative