



Parental Consent Form

Your child wants to send his or her work to us to place on our website. In order for them to do this we require your permission. Please fill in the form below or send us an email giving your permission.

I _____ give my consent for my child's work to be placed on the SUPAkidz website (www.supakidz.net.nz)

My relationship to the child: _____

Signature: _____

Date: _____

Child's name: _____

Email address: _____

Country (if outside New Zealand) _____

My child is: Male / Female (please circle)

Please send to:

SUPAkidz website
PO Box 8517
Symonds Street
Auckland
New Zealand

