

Legislative Assembly of Ontario Model ParliamentAcknowledgement and Consent Form

Student Name I hereby acknowledge that I understand the requirements and commitment expected of me for the Legislative Assembly of Ontario's Model Parliament Program. I will actively participate by:	
 Completing weekly assignments on time 	Attending all scheduled events and meetings*
meeting on November 7, 2024. If a part staff in advance and provide proof of ab	n meetings is mandatory for all participants including the first ticipant is unable to attend a scheduled meeting, they must notify beence if requested. If a student misses 2 meetings or does not ogue with staff, they may be removed from the program.
I have discussed the program with my parent/guardian and wish to participate fully.	
Student Signature	Date
requirements and commitment expecte Parliament Program. The program will b Building in Toronto. Students will be req	named above, I hereby acknowledge that I understand the ed of the student for the Legislative Assembly of Ontario's Model be offered via Microsoft Teams and in person at the Legislative juired to check in online regularly for updates, assignments and endance policy above, may result in a student's removal from the
Furthermore. I give consent to the Legis	lative Assembly of Ontario to publish photographs and/or
	promotional and educational purposes.
	promotional and educational purposes.

Date

Parent/Guardian Signature