



## AEF Instructor/Coach Parental Consent Form

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### Parental Consent Form – Applicable to all Candidates Under the Legal Age of 18 years

I, \_\_\_\_\_,

*(Parent/Guardian Name Printed)*

make oath & say that I am the lawful guardian of the following individual (whom is under 18 years of age):

**Minor Name:** \_\_\_\_\_

**Permanent Mailing Address of Minor:** \_\_\_\_\_

**City and Province Minor resides within:** \_\_\_\_\_

**Birthdate of Minor:** \_\_\_\_\_

**AEF or other P/TSO Number of Minor:** \_\_\_\_\_

I hereby grant \_\_\_\_\_, my consent to participate within the EC/NCCP Instructor/Coach programming and evaluation and training process associated within. I recognize that this is a professional designation and follows strict guidelines that are in line with NCCP principles. I have read through all course materials and requirements, and understand that it is the responsibility of the candidate to ensure all information required to apply is provided in a timely manner and that significant measures are taken to prepare for evaluation. I recognize that "evaluations" are closed events and not open to the public and realize as such that the minor in question will be required to present themselves in this respect.

**Parent/Guardian Signature:** \_\_\_\_\_

**Date (yyyy-mm-dd):** \_\_\_\_\_