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_____	_____	_____
Name (print)	**Email**	**Phone Number**

_____	_____
Signature	**Date**

FOR MINORS

I hereby certify that I am the parent and/or legal guardian of the above-named minor, and do hereby give my consent without reservation to Penn State on behalf of such minor child.

_____	_____	_____
Name (print)	**Signature of Parent or Legal Guardian**	**Date**

Please return form to:

Patricia Craig, Liam Jackson, or David Kubarek
College of Earth and Mineral Sciences, Office of the Dean
116 Deike Building, University Park, PA 16802-5000
contact@ems.psu.edu | 814-863-4663

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