

PARTICIPATION APPROVAL

I hereby give permission for my child to participate in the Situation Room Experience. I understand that the activity is designed to simulate a civic leadership crisis. Participants will be confronted with a civic crisis and attempt to address and resolve the matter by working in teams.

Furthermore, I acknowledge the fact that the scenario is completely fictional and is intended to be educational, not political, emphasizing civics.

I understand that the Situation Room Experience is designed to promote collaboration, team building, communication and leadership skills, for participants in real time.

School/Group Name

Student Name

Parent/Guardian Signature

Date