## **YEAR 9 RITE JOURNEY**

## **Mentor Response Form**

Please return this consent form to the Secondary Administration Office or your child's Rite Journey coordinator by the first day of Term 1, 2023.

| Student first name                   |                         | Student last name |                   |
|--------------------------------------|-------------------------|-------------------|-------------------|
|                                      |                         |                   |                   |
| Mentor first name                    | N                       | Mentor last       | name              |
|                                      |                         |                   |                   |
| Mentor email                         |                         |                   | Mentor phone      |
|                                      |                         |                   |                   |
| Mentor's relationship to student (✓) | :                       |                   |                   |
| Extended family/relative             | Church family           |                   | Family friend     |
|                                      |                         |                   |                   |
| Youth/Sport leader                   | Other (please describe) |                   |                   |
|                                      |                         |                   |                   |
|                                      |                         |                   |                   |
| PARENT SIGNATURE                     | <br>MENTOR SIGNA        | ATURE             | STUDENT SIGNATURE |