



C.A.R.E. Parent Consent Form

Please return this form by mail, fax, e-mail or have your child deliver it when he/she comes in for the screening.

C.A.R.E.
6000 Preston Rd.
Dallas, TX 75205

Phone: 214-526-8986
Fax: 214-520-9549
e-mail: susanh.care@ymcadallas.org

In order to attend C.A.R.E.'s New Directions class, students are required to participate in an assessment before they can be enrolled. We must have written parental consent.

C.A.R.E. also offers an optional TeenScreen computer program to the student, which may indicate emotional problems, such as depression. We must have written parental consent. **I understand that C.A.R.E. is not responsible for providing additional services that may be recommended as a result of participating in the TeenScreen program.**

Required

I give permission for my child to participate in the New Directions assessment.

Optional

I give permission for my child to participate in the TeenScreen Program.

I do not want my child to participate in the TeenScreen Program.

Student's Name (Print) _____ Grade _____

Parent/Guardian's Name

(Print) _____

Address _____

Home phone _____

Work phone _____

Cell phone _____

Parent/Guardian's Signature _____

Date _____