



Learner Nook Online Services

PARENTAL CONSENT FORM

www.learnernook.com Send the completed form at: nook001@bestmail.us

I confirm that I am _____, a parent/legal guardian of _____.

I hereby consent to the above named child to (check one or both options):

- participate in online tutoring at Learner Nook via Zoom services;
- provide us with the date, time, place of birth to produce horoscope analysis.

I confirm that I have read, understood and agreed to the Learner Nook's Privacy Policy and give permission to use my child's personal information for the provided services.

I confirm that the personal information I provide in the registration form is correct, and I agree to inform Learner Nook of any corrections of this information.

I give my parental consent to the Learner Nook service for using my child's personal information such as name, school grade, date, time, and place of birth as it is required for the purposes of providing online tutoring or horoscope analysis.

Parent's Name (please, print):

Parent's Signature:

Date: ____/____/____

Your Valid E-Mail Address: _____