



Olney Friends School

Office of the Dean of Students

Request for Designation of Guardian

Student's Name _____ Graduation Year 20_____

For families who live outside of the United States, we require that you identify a guardian for your student. The person named below shall have the authority to grant permission for this student to spend overnights or weekends away from the school, to authorize vacation plans, to communicate generally with the school on short notice with respect to the student's activities at the school, and to serve as host to the student in the event of a required leave from the school. We understand that this designation will remain in effect until the end of the school year or until we request a change of guardian.

The guardian MUST be an individual or married couple over the age of 21 and is subject to approval by the school.

The person named below has agreed to serve as guardian.

Guardian's Name _____ Relationship to Student _____

Address _____

City _____ State _____ Zip Code _____

E-mail _____ Home Phone _____ - _____ - _____

Work Phone _____ - _____ - _____ Cell _____ - _____ - _____

I authorize the above-named person to receive correspondence from the school.

Other relatives and/or friends in the United States (who may be contacted in case of emergency):

Name _____ Relationship to Student _____

Address _____

City _____ State _____ Zip Code _____

E-mail _____ Home Phone _____ - _____ - _____

Work Phone _____ - _____ - _____ Cell _____ - _____ - _____

Name _____ Relationship to Student _____

Address _____

City _____ State _____ Zip Code _____

E-mail _____ Home Phone _____ - _____ - _____

Work Phone _____ - _____ - _____ Cell _____ - _____ - _____

In making this request, we/I do hereby release and forever discharge Olney Friends School, its agents, employees, successors or assigns, and any such guardian who shall be so designated by Olney Friends School from any and all claims and damages of whatever nature and whatever time that might result directly or indirectly from such designation or from the judgements and/or decisions made by such guardian within the scope of the authority set forth above.

Date (month) _____ (date) _____ (year) _____

Name (print) _____ (sign) _____ Relationship to Student _____

Name (print) _____ (sign) _____ Relationship to Student _____

Address _____

City _____ Country _____ Postal Code _____

E-mail _____ Phone _____ - _____ - _____