

Student Release Form



jackson hole tutoring

Please sign below, granting me permission to speak with guidance counselors, tutors, teachers and others who have worked with your son or daughter.

I, _____ (parent or guardian), give Jackson Hole Tutoring permission to speak with guidance counselors, tutors, teachers and others who have worked with _____ (student).

Student for whom services are provided

Date

Parent, Guardian, or Guarantor of Payment

Date

Parent, Guardian, or Guarantor of Payment

Date