

Consent Forms

I agree to allow _______ to participate in all programming, group outings and activities while he/she is a resident of Valley Hill Youth Treatment Centre.

The following signed consent form will include the following (Please check mark all):

- Participant Service Agreement
- □ Outing/Leisure Activities
- Consent for Treatment
- D Picture/Video, Telephone Consent
- □ Transportation
- Medical

(Please note: Valley Hill Youth Treatment Centre is a non-smoking facility as of March 31, 2014)

Participant's Signature:

Family/Guardian's Signature:_____

VHYTC Staff's Signature: