

# Regent University Library

## Parent Authorization Form

As the parent/legal guardian I assume financial responsibility for all materials checked out by the applicant below. I agree to ensure the return of all items by the due date and will pay full replacement cost for lost materials.

**School/Organization Name:**

Atlantic Speech and Debate Club

**Applicant's printed name:**

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**Applicant's signature:**

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**Applicant's birthdate:**

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**Parent/Guardian signature:**

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*(Required if under age 18)*

**Printed Parent/Guardian name:**

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**Parents should provide ID (driver's license, etc) with the submission of this form.**