**Consent of the minor's parent / legal guardian**

I, the undersigned …………………………………… (name and surname of the parent / legal guardian), ID number …………………………………… consent to the provision of voluntary services for the University of Warsaw in the period …………………………………… by …………………………………… (name and surname of the Volunteer) who is under my legal care.

…………………..

(date)

……………………………………

Parent / legal guardian signature

Parent / legal guardian phone number: ……………………………………