



# **Big Brothers Big Sisters of Cambridge**

151 Savage Drive, Unit 5A  
Cambridge, Ontario N1T 1S6  
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## **Overnight Visit Consent Form**

I, \_\_\_\_\_, the Parent/Guardian of

\_\_\_\_\_, (Child's name)

consent to an overnight visit between my child and his/her Big Brother/ Big Sister

\_\_\_\_\_ (Big's name)

on \_\_\_\_\_ (dates).

My child and his/her Big Brother/ Big Sister will be staying at:

\_\_\_\_\_ and can be

reached at the following phone number \_\_\_\_\_ &/or

\_\_\_\_\_.

I understand that, according to the Big Brothers Big Sisters of Canada's National Standards an overnight visit cannot occur within the first year of the match. I further understand that overnight visits can be no more than three nights in a row, and can occur no more than four times a year. All overnight visits must take place within Canada.

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Mentoring Coordinator

\_\_\_\_\_  
Date