

**PARENT / GUARDIAN CONSENT FORM**

**For all polygraph examinations administered to minors and other persons deemed dependents.**

*To precede and accompany the release form signed by the examinee at the time of the examination.*

I, \_\_\_\_\_, parent / guardian (circle) of \_\_\_\_\_  
(client / examinee), do hereby declare that I (and my agency / spouse) voluntarily agree to allow the  
above named client/examinee to be interviewed and/or take a polygraph (lie-detection or truth-  
verification) examination to be by the qualified polygraph examiner listed below.

Examiner: \_\_\_\_\_.

I (and my agency / spouse) do hereby voluntarily agree that said interview and/or polygraph examination  
should be administered and the results and opinions transmitted (verbally and in writing) to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

and

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

In consideration of and as an inducement to administer said interview and/or polygraph examination by  
the above named qualified polygraph examiner, I (and my agency / spouse) do hereby totally release the  
above named examiner, including all agents, agencies, affiliates, and associates, both individually,  
collectively, and personally, from any and all suits, actions, causes of actions, proceedings at law or  
equity, claims demands, damages, costs, expenses or liabilities whatsoever anyone might ever have as a  
result of the above named client/examinee being interviewed and/or taking the polygraph examination as  
well as the transmission and utilization or the results and opinions thereof.

Also, I (and my agency / spouse) agree to abide by all the conditions stated on the attached form, which  
the above named client/examinee has my (and my agency / spouse's) permission to sign prior to, and on  
the day of, the scheduled polygraph examination.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**