

CREIGHTON PREP  
TRAP SHOOTING TEAM  
PARENTAL CONSENT TO DISCLOSURE  
OF ACADEMIC INFORMATION FORM

I, \_\_\_\_\_, hereby consent to the disclosure by  
(Parent or guardian's name)  
Creighton Prep High School to the trap shooting coaches, the Eastern Cornhusker Trap Shooting Conference, and the Nebraska State Game and Parks Commission my son's academic record (grades) with the understanding that these records (grades) are to be used only for the purpose of awards and scholarships that are given in connection with my son's involvement with High School or College Trap Shooting. I further consent to and understand that his grade point average may appear on an award or awards certificate and that said award or certificate may be publicly announced. This consent will remain in effect for as long as my son is a student at Creighton Prep and involved with High School Trap Shooting unless revoked in writing.

\_\_\_\_\_  
Son's Name

\_\_\_\_\_  
Son's Student ID Number

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name