



COUNTY OF MONMOUTH OFFICE OF THE FIRE MARSHAL

1027 HIGHWAY 33 EAST
FREEHOLD, NEW JERSEY 07728-9998

KEVIN STOUT
FIRE MARSHAL

OFFICE: 732-683-8856
FAX: 732-683-8864

FIRE FLY CONSENT FORM

Dear Parent:

As you know, adolescence is a confusing time. Your son/daughter _____ has requested the opportunity to work through some of the problems and concerns of being a teenager by partaking in a counseling program provide by the Monmouth County Fire Marshal's Office. Your permission is needed to allow your child to participate. There is no charge for this service.

Kevin Stout
Monmouth County Fire Marshal

Monmouth County Fire Fly Program

PARENTAL CONSENT FORM

I, _____ residing at _____
_____ and can be reached by telephone number #: _____
give permission for my child _____
to participate in counseling program(s) that will be provided by the Monmouth County Fire Marshal's
Office.

Date

Signature – Parent/Legal Guardian

/tjk