

**Written consent about the occupation of a child/teenager under the  
age of 15 according § 6 JArbSchG to be presented with  
Regional Authorities, Health and safety protection and technical security Berlin  
(LAGetSi)  
Turmstraße 21, 10559 Berlin**

**Parents/Legal Guardian\***

I do herewith agree, that mine/our child

Surname, First Name: .....

Date of birth: .....

Level of School: .....

Address: .....

can participate in the production according to the young persons protection of  
employment act .

My child has been employed for ..... days this legal year.

I am aware of the conditions of the proposed employment and I agree to my  
son / daughter being employed.

.....  
Printed name Signature

Date ...../...../.....

Telephone / mobile .....

\*) I reserve the right to intervene and I undertake to inform the Regional Authorities, Health and safety protection and technical security Berlin about my revocation. As soon as the child gets health problems due to his/her participation in the performance, I am going to withdraw my consent. I accept that information can be gathered at the government office for youth welfare.

