



**VIRGINIA DEPARTMENT OF CORRECTIONS**  
**Parental Consent to Tour Correctional Facility**

I hereby give consent for my child, \_\_\_\_\_, age \_\_\_\_\_ to visit /  
tour \_\_\_\_\_, a state correctional  
facility, under the supervision of the Department of Corrections, on (Date) \_\_\_\_\_.

I understand that my child may be frisk searched by a corrections officer of the same gender  
prior to entering the facility.

I certify that I am the parent or legal guardian of said child.

SIGNATURE: \_\_\_\_\_

NAME PRINTED: \_\_\_\_\_

DATE: \_\_\_\_\_