

Patuxent Institution

Women Reasoning About Problems (WRAP) Consent Form

Sponsoring Organization: _____

Date of Tour/Visit: _____

I give permission for _____ to visit the Patuxent Institution

With the above named group, on the above-identified date(s) to participate in the WRAP Program. I understand that the Patuxent Institution is an adult penal facility for sentenced men and women in the state of Maryland. While the facility is treatment oriented, it is nevertheless a maximum- security facility. The object of the reasoned Straight program is to allow youth to meet offenders who have volunteered for the program and who are trained to lead discussions on issues that can assist in making decisions that avoid violations of the law that result in incarceration. The program also includes a tour of the facility to expose the youth to the realities of prison life. The program is not intended to scare the youth or to intimidate. While an officer will accompany the chaperoned group throughout the prison the tour is designed to limit the direct contact between the general inmate population and the group, there will be instances where the group and inmates are in the same area. In such instances, the inmate population has been known to engage in verbal taunting. I understand that the Patuxent Institution will take all reasonable precautions to avoid physical contact between the inmates and the youths. I will not hold Patuxent Institution liable for any incident that is beyond the Institution's ability to control with reasonable precautions. I attest that this individual is not under jurisdiction of the Department of Juvenile Services.

I certify that I am the parent or guardian for the above named individual.

_____	_____	_____	_____
Date	Name(print)	Signature	Relationship

Juveniles date of birth_____ The juvenile must be at least 12 years of age minimum and no older than 20.

EMERGENCY INFORMATION

Visitor _____

Address _____

Phone _____

Contact in the event of an emergency _____

Phone Day: _____

Evening: _____

Patuxent Institution

Reason Straight Consent Form

Sponsoring Organization: _____

Date of Tour/Visit: _____

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