Open Door Authorization

To: NDU Student Housing
    Student Affairs Office

I/we the parent(s)/guardian(s) of the student ____________________________
ID # ____________________ permit our daughter/son to stay out late on the
Open Door nights during which the doors of NDU Student Housing will remain
open all night.

I/WE assume full responsibility and understand that the university is not to be
held liable in any way for anything that might happen to our daughter/son while
off campus.

Name of the parent(s)/guardian(s): ____________________________________

Telephone number: _________________________

E-mail address: ___________________________________________________

Date: _________________________

Signature of the parent(s)/guardian(s): ___________________________

P.S.: This authorization remains valid during the entire period of the above
mentioned student’s residency. In case of any change, your written notification is
required.