

### Parent or Guardian Release

To Whom it May Concern:

I hereby authorize my child \_\_\_\_\_ to participate in the activity (camp, trip, or cruise) as described below. Said child to be amenable to such rules and regulations as may be made by the Executive Board or its representatives.



It is expressly understood by the parents or guardian that the member for whom this application is made is in a condition of health that warrants his taking part in the event, and that the leader of this outgoing is hereby granted permission to take the named member to a medical doctor for examination and treatment for any accident or illness that may arise during the term of the said outing (see authorization below).

### Authorization to Consent of Treatment to Minor

(I) (We), the undersigned parent(s) of \_\_\_\_\_ a minor, do hereby authorize \_\_\_\_\_ as agent(s) for the undersigned to consent to x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision, of any physician and surgeon licensed under the provision of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care which the aforementioned physician, in the exercise of his best judgement may deem advisable.

This authorization shall remain in effect for the date(s) of the event given below.

### Event Information

Event Description:			
Dates:	From:	To:	Departure Time:
Mode of Transportation:			
Parent/Guardian Signature & Date:			
Home Phone:		Business Phone:	
Emergency Contact Name:		Phone:	