

MINOR MEDICAL RELEASE & TRAVEL CONSENT

I do hereby give The Kansas City Junior Blues the authority and responsibility to care and govern my child/ward _____ and to act in my place as parent/guardian of said child and exercise such duties and responsibilities as I myself would discharge, including, but not limited to the authority to seek and approve appropriate medical treatment, to administer appropriate discipline if necessary. This authority shall hold from March 11, 2010 to March 23, 2010 during the Rugby Tour held in Ireland and shall include the time needed to travel to and from said event. I assume all financial and legal responsibility for emergency medical treatment.

Insurance Company: _____ Policy #: _____

Signature of Parent/Guardian: _____

Address: _____

Phone #1: _____ Phone #2: _____

Person who can locate parents at all time: _____

Address: _____

Phone #1: _____ Phone #2: _____

Signature of Notary: _____

Date: _____

Commission #: _____

Expiration Date: _____