

Ban Phục Vụ Đông Bắc – Đồng Hành Northeast Region

Cộng Đoàn Đồng Hành – Đồng Hành-CLC

P.O. BOX 2862

Merrifield, VA 22116

MINOR CONSENT

(This form **MUST** be completed and returned for ALL PARTICIPANTS OF 18 YEARS OLD AND UNDER)

In consideration of **Đồng Hành Northeast Region Gathering** at Fatima Center - Diocese of Scranton – Office for Parish Life, 1000 Seminary Road, Dalton, PA 18414-9591, from July 29th to July 31st, 2011. I hereby for the person named below as the parent(s) or the authorized person/sponsor, waive and release any and all rights and claims of any nature that I may have against Đồng Hành Northeast Region, the organizer of the fore mentioned gathering and all its assistants for and against any and all injuries during the entire stay, including traveling to Fatima Center, this includes all the cost or expenses of any medical care given the child or any expenses or fees incurred in any lawsuit arising as a result of any damage or injuries caused by my child in the course of his or her participation in the activity

Name of the Parent (**required**)

Name of the Authorized Person/Sponsor
(need ONLY if no parent(s) attend(s) the Event)

Signature of Parent (**required**)

Signature of the Authorized Person/Sponsor
(need ONLY if no parent(s) attend(s) the Event)

Parent Home Phone

Parent Work Phone

DATE

I further give my consent to that in my absence the below-named minor(s) be admitted to any hospital or medical facility or diagnosis and treatment. I request and authorize physicians, dentists, and staffs, duly licensed as Doctors of Medicine or Doctors of Dentistry or other such licensed technicians or nurses, to perform any diagnostic procedures, treatment procedures, operative procedures and x-ray treatment of the below minor(s)

Name of the child (required)

Name of the child (required)

Name of the child (required)

Name of the child (required)

Name of the child (required)

Name of the child (required)