

Pacific Yearly Meeting - Religious Society of Friends

PARENTAL CONSENT FOR MINORS (age 17 and under)

One form per participant. This AND the medical information form must be turned in before your child may attend this event.

PERMISSION TO ATTEND

I/We, the undersigned parent(s) or person having legal custody/guardianship of _____, a minor, give permission for this minor to attend the Youth Program of Pacific Yearly Meeting and Orange Grove Meeting of the Religious Society of Friends for the dates and location noted below:

Event: Teen retreat hosted by Orange Grove Meeting and the PYM Youth Program, June 30-July 1, 2012

AUTHORIZATION FOR THIRD PARTY CONSENT TO MEDICAL TREATMENT OF MINOR LACKING CAPACITY TO CONSENT

I/We, the undersigned parent(s) or person having legal custody/guardianship of _____, a minor, do hereby authorize any personnel or any staff person(s) of Pacific Yearly Meeting or Orange Grove Meeting of the Religious Society of Friends, as agent(s) for the undersigned to consent to any 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 provisions of the Medical Practice Act on the medical staff of any 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 being required, but is given to provide authority to the aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment or hospital care which a physician meeting the requirements of this authorization may, in the exercise of his/her best judgment, deem advisable. This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California. I/We hereby authorize any hospital which has provided treatment to the above-named minor pursuant to the provisions of Section 25.8 of the Civil Code of California to surrender physical custody of such minor to my/our above-named agent(s) upon the completion of treatment. This authorization is given pursuant to Section 1283 of the Health and Safety Code of California.

FIELD TRIP PERMISSION

In addition, the above minor has my/our permission to participate in the program of Pacific Yearly Meeting and Orange Grove Meeting of the Religious Society of Friends organized for his/her age group. This includes permission to go on field trips in buses or private cars (including swimming). It is Pacific Yearly Meeting's policy that all passengers be seat-belted and all drivers have appropriate automobile insurance.

PARENT/GUARDIAN SIGNATURE

These authorizations shall remain effective from June 29, 2012 to July 1, 2012 unless sooner revoked in writing delivered to said agent(s). The undersigned agree to hold Pacific Yearly Meeting and Orange Grove Meeting of the Religious Society of Friends and its officers, agents, teachers and other personnel harmless of any claim by the undersigned arising out of any medical treatment given by or attempted in connection with any medical emergency.

Parent / Legal guardian / Person having legal custody (circle relationship):

DATE PRINTED NAME SIGNATURE

How will your child arrive at the event? _____

How will your child be leaving the event? _____

(Youth Parental-rev.6/12, YPC)