CPQM PARENTAL CONSENT FOR MINORS (age 17 and under)

PERMISSION TO ATTEND
I, the undersigned parent or person having legal custody/guardianship of ________________, a minor, give permission for this minor to attend the Children’s or Teen Program of College Park Quarterly Meeting of the Religious Society of Friends for the dates and location noted below.

AUTHORIZATION FOR THIRD PARTY CONSENT TO MEDICAL TREATMENT OF MINOR
I, the undersigned parent or person having legal custody/guardianship of ________________, a minor, do hereby authorize any personnel or any staff person(s) of College Park Quarterly 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 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 College Park Quarterly Meeting of the Religious Society of Friends organized for his/her age group. This includes permission to go on field trips in private cars (including swimming). It is College Park Quarterly Meeting’s policy that all passengers be seat-belted and all drivers have appropriate automobile insurance.

SPONSORSHIP PERMISSION
I do hereby authorize the adult named below (SPONSOR) to sponsor the above-named minor during the College Park Quarterly Meeting of the Religious Society of Friends events on the dates and at the locations noted below when I/we will not be in attendance.

PARENTS’ AND SPONSOR’S SIGNATURES
These authorizations shall remain effective for one year unless sooner revoked in writing delivered to said agent(s). The undersigned agree to hold College Park Quarterly 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):

<table>
<thead>
<tr>
<th>LOCATION OF EVENT</th>
<th>PARENT NAME (PRINT)</th>
<th>PARENT SIGNATURE SPONSOR (if any)</th>
<th>DATE</th>
</tr>
</thead>
</table>

Sponsor: I will be attending the event described above at the same time as the above-named minor, and I agree to accept the responsibility of sponsoring the minor:

<table>
<thead>
<tr>
<th>LOCATION OF EVENT</th>
<th>SPONSOR’S PRINTED NAME</th>
<th>SPONSOR’S SIGNATURE</th>
<th>DATE</th>
</tr>
</thead>
</table>

Because of privacy issues, this form will be destroyed after each event. You must fill out a new form for each event.