

**NATIONAL CHARITY ROUNDTABLE
THE WOODLANDS CHAPTER
PERMISSION AND CONSENT FORM**

I, _____, the parent having legal custody of, or the legal guardian of, _____, a minor, give permission for him to attend and to participate in all activities/outings/events of The Woodlands Chapter of National Charity Roundtable for the period _____ to _____ (senior year). Further, I hereby agree to indemnify and hold National Charity Roundtable harmless from the acts of said minor while participating in the activities of National Charity Roundtable. I further authorize any adult or member of National Charity Roundtable who is in charge of the above referenced event/activity to whom the care of the minor has been entrusted, to arrange all necessary emergency first aid including x-ray examination, anesthetic, dental, or medical or surgical diagnosis or treatment, and hospital care in the event that the undersigned is unable to consent to such emergency treatment. This authorization is given pursuant to the current applicable civil code of the state of Texas and remains in effect for the event and dates listed above.
Every effort will be made to contact parents immediately!

Doctor: _____ Phone: _____

Address & City: _____

Date of Last Tetanus Shot: _____ Allergies: _____

Medications currently being taken: _____

Any Other Pertinent Medical Information: _____

Signature of Parent or Legal Guardian: _____

Date _____ Address _____

Phone _____ Cell phone _____

Name of Insured: _____

Medical Insurance Carrier: _____

Telephone/Contact Number: _____

Policy/Group Number: _____