



Creating a network of hope for the children of our fallen heroes

**Snowball Express Letter of Consent
To attend and travel with someone other than Parent or Guardian
Medical Power of Attorney**

Please print clearly:

I, _____, as parent or guardian of minor child/children:

_____/_____

_____/_____

give my authorization for the above child/children to travel to and attend Snowball Express IX with

_____, who also has my express permission to authorize and sign

for emergency medical care and/or treatment that may be required in the event I cannot be reached.

This consent is in effect from December 11, 2014 to December 15, 2014.

Signature of Parent/Guardian

Date signed

Home phone number _____

Cell phone number _____

THIS FORM MUST BE NOTARIZED

THE STATE OF _____)

COUNTY OF _____)

BEFORE ME, _____ on this day personally appeared _____, known to me (or proved to me under oath or through _____) (description of identity card or other document) to be the person whose name is subscribed to the foregoing instrument. He/she, after first being duly sworn by me, on their oath acknowledged that he/she executed this Medical Power of Attorney for the purposes of consideration therein expressed.

Given under my hand and seal of office this

_____ day of _____, 2014

SEAL

Notary Public in and for _____ County
The State of _____
My Commission expires: _____

**Please access your on-line family record and
upload the completed document**