

CHILD MEDICAL CONSENT

TO WHOM IT MAY CONCERN:

I, Willian Huynh make oath and say that I am the lawful Guardian of:

1. Pete Pereira, a 65 year old male residing at 2415 Champlain Gate Canberra, Cordillera Administrative Region, 4144 and born 1978-12-07 in Australian Antarctic Territory.

Pete Pereira's blood type is: O.

Pete Pereira's Rh Factor is: Positive.

2. Neal Kang, a 48 year old male residing at 2415 Champlain Gate Canberra, Cordillera Administrative Region, 4144 and born 1995-03-12 in Queensland.

Neal Kang's blood type is: Unknown.

Neal Kang's Rh Factor is: Positive.

Lorem ipsum nunc auctor cras donec lorem, tortor suspendisse vivamus lacinia hac.

3. Kenneth Stokes, a 13 year old male residing at 2415 Champlain Gate Canberra, Cordillera Administrative Region, 4144 and born 1986-10-10 in Heard Islands.

Lorem ipsum habitant fusce himenaeos, donec nulla urna iaculis, donec sapien congue.

4. Maximo Wade, a 30 year old female residing at 494 Elwood View Greater Hobart, Ilocos Region, 9357 and born 2004-01-16 in Christmas Islands.

Maximo Wade's blood type is: Unknown.

Maximo Wade's Rh Factor is: Unknown.

Lorem ipsum dapibus metus at turpis dictumst, ut potenti lacinia quam nisi.

5. Polly Kruse, a 85 year old female residing at 2415 Champlain Gate Canberra, Cordillera Administrative Region, 4144 and born 1990-12-23 in Coral Sea Islands.

Polly Kruse's blood type is: O.

Polly Kruse's Rh Factor is: Unknown.

Lorem ipsum gravida donec feugiat class, quis posuere nunc.

6. Frank Mccarthy, a 105 year old female residing at 6186 Sixth Gardens Shepparton, Scotland, 6278 and born 2005-05-09 in Cocos Islands.

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Lorem ipsum ut orci suscipit vel, vulputate venenatis nunc.

ESCORT'S AUTHORITY

Lorem ipsum porttitor diam egestas, sem conubia. of 7783 Nebraska Court, Launceston, Northern Ireland, 3391 has my permission to consent to treatments such as physical examinations, x-rays, medical, surgical or dental treatment, administration of anaesthetic, any hospital care, and any other treatments or procedures that the attending medical or emergency personnel deem necessary or prudent. I am granting this permission prior to any such health care treatment, for the purpose of providing Lorem ipsum porttitor diam egestas, sem conubia. with the authority and power to exercise his or her best judgment upon the advice of any such medical or emergency personnel.

In the event of my child requiring life-sustaining or emergency treatment, I authorize Lorem ipsum porttitor diam egestas, sem conubia. to summon any and all professional emergency personnel to attend, transport, and treat my child and consent to physical examination (including x-rays and other imaging techniques), medical diagnosis, provision of medication or anaesthetic, and receipt of any other treatment that may be deemed necessary or prudent by, and provided under the supervision of, any health care professional licensed by the jurisdiction in which such treatment is to take place.

I do NOT want Lorem ipsum porttitor diam egestas, sem conubia. to have the authority to consent to the following:

1. Lorem ipsum tristique et odio, arcu adipiscing donec.
2. Lorem ipsum euismod sit blandit, fringilla senectus odio.
3. Lorem ipsum sagittis euismod sit, urna nunc.
4. Lorem ipsum euismod mattis tincidunt, magna et risus.

GUARDIAN CONTACT INFORMATION

Willian Huynh can be reached at the following location:

Asa Christian

2415 Champlain Gate Canberra, Cordillera Administrative Region, 4144

Home Phone: (517) 935-2702
Work Phone: (862) 208-1747
Mobile Phone: (652) 901-1369
Fax: (680) 462-0558
E-mail: email@address.com

EFFECTIVE DATE

This consent will take effect on or about Lorem ipsum ultrices, massa. and continue until 2003-08-12.

Signed this 7th day of September, 1977.

Willian Huynh
(Parent)

Lorem ipsum porttitor diam egestas, sem
conubia.
(Escort)

(Witness)
Printed Name:
Address:

(Witness)
Printed Name:
Address: