

MOOSE YOUTH AWARENESS PROGRAM 2011-2012 ASSOCIATION CONGRESS CONSENT FORM

I, the undersigned parent/guardian of _____ (“my child”),
a minor, hereby give my consent for him/her to attend the Moose Youth Awareness Congress at
_____ on _____, 20__.

In consideration for my child being allowed to participate in this event, I hereby authorize the provision of all necessary emergency (as defined by local and national medical standards) medical care to my child (including medical, dental and/or surgical) and attach a current, valid copy of my medical insurance card to this agreement. I agree that neither Moose International, Inc. (“MI”) nor _____ Lodge No. _____, Loyal Order of Moose, Inc. (“Lodge”) shall have any financial responsibility for the emergency medical care provided to my child. I also agree to fully defend, indemnify and hold harmless the Lodge and MI, their respective agents, volunteers, employees, directors, officers, successors and assigns from and against any and all losses, damages, claims and causes of action brought by or on behalf of my child, with the exception of losses arising from their sole gross negligence. I further agree this agreement shall be binding upon my heirs, successors and assigns.

REGISTRATION INFORMATION

Student’s Name: _____ Sex (circle one) Male Female

DOB _____ Class of 20 _____ Parent/Guardian Name(s): _____

Address: _____ E-mail address: _____

City: _____ State/Province: _____ Zip: _____ Phone: _____

School Name: _____ School Phone: _____

Address: _____

City: _____ State/Province: _____ Zip: _____

PUBLICITY RELEASE

Moose International may use my name and photograph in publicity concerning the 2011-2012 Moose Youth Awareness Program.

Signature of Student Representative

Dated this _____ day of _____, 20__.

Parent/Guardian signature

Parent/Guardian signature

Parental Consent form