

Minor's Release

I do hereby consent and agree that it is satisfactory for our minor son/daughter (name) _____ to participate in the Trinity Valley Exposition _____ Event, the TVE Board or Directors and Show officials, or any other persons connected with this activity mentioned above individually or collectively, responsible for any liability mentioned above individually or collectively, responsible for any liability or bodily injury or any other damage or loss suffered while a participant.

Authorization for Medical Care

In case of sudden illness or accident to the above name participant immediate treatment of surgery while en route to the activity, while there as a participant, and/or while returning from the event. I authorize TVE personnel serving, as chaperon(s) to take such action as seems appropriate to protect the health and physical well being of the participant. This authority extends to any physician or surgeon selected by the chaperon(s) to perform medial or surgical procedures necessary to preserve the life or well being of the above named participants. The following information is provided as an aid to chaperon(s) in dealing with the well being of the named persons.

The participant has the following health condition (including such things as handicaps, diabetes, asthma, allergies, and medication needed):

The following are means of contacting a family member of the participant:

Telephone contact for a parent or guardian:

Home Phone: _____

Business Phone: _____

Telephone contact for a neighbor or relative who could locate the participant's parents or guardian:

Name: _____

Home Phone: _____ Business Phone: _____

Signature of parent or guardian

Date

Subscribed to and sworn to before me this _____ day of _____, _____.

City or place

County

State

Notary Public

County, Texas