

**LIABILITY RELEASE WITH PARENTAL CONSENT FOR MEDICAL/EMERGENCY TREATMENT AND TRANSPORTATION**

CHILD'S NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_

EMERGENCY CONTACT PHONE NUMBER(S) \_\_\_\_\_/\_\_\_\_\_

The undersigned(s) being the lawful parent(s) and/or guardian(s) of the above child, hereby consent to the participation by the child in all age appropriate activities conducted by **Blue Thunder** representatives and to the participation of the child in all events related to said activities.

The undersigned hereby further authorize(s) the adult representatives of **Blue Thunder** to provide for, approve, and authorize any health care at any hospital, emergency room, doctor's office or other institution, employ any physicians, dentists, nurses or other person whose services may be needed for such health care.

The undersigned(s) hereby further authorize(s) emergency transportation by either **Blue Thunder** adult representatives or if necessary by ambulance or other emergency vehicle.

If there is no medical emergency, the **Blue Thunder** adult representatives will first use reasonable efforts to contact the parent(s) and /or guardian(s) before administering or authorizing any treatment.

Notwithstanding other provisions in this consent form, **Blue Thunder** Representatives shall not have the authority to withhold or withdraw life-sustaining procedures for the child.

The children will be consistently well supervised. However, accidents do happen. The undersigned(s) assume(s) all risk of injury or harm to the child associated with participation in said events and agree(s) to release, indemnify, defend and forever discharge **Blue Thunder** and its representatives of and from all liability, claims, demands, damages, costs, expenses, actions and causes of action in respect of death, injury, loss or damage to the child, or by the child, howsoever caused, arising or to arise by reason of or during the child's participation in the said event.

Known Allergies:

\_\_\_\_\_

Medications (please include name and instructions):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Name (Print)

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date