New Generation Singers Medical Consent and Permission Form 2021

As legal guardian of(si	, I give	permission for said
(si person to go on the New Generation		
The following are physical/mental co including allergies:	nditions of which the sponsors	s should be aware,
The following are medications/treatm	ents used to manage these c	onditions:
<u>Insurance</u>		
Company	Carrier of insurance	
Policy Number/Group Number		
(guardian's signature) @w A f cai oje rf c`mv wms t coogolw rf_r v qoel_rspc_`mt c oq_t_job cjcarpml oa		(date)

Feel free to list any extra information you wish us to know on the back. Or you are welcome to see Carol or Emily for a private conversation.