

# New Generation Singers Medical Consent and Permission Form 2022

As legal guardian of \_\_\_\_\_, I give permission for said  
(singer's name)  
person to go on the New Generation Tour.

The following are physical/mental conditions of which the sponsors should be aware,  
including allergies:

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The following are medications/treatments used to manage these conditions:

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## Insurance

Company \_\_\_\_\_ Carrier of insurance \_\_\_\_\_

Policy Number/Group Number \_\_\_\_\_

\_\_\_\_\_  
(guardian's signature)

\_\_\_\_\_  
(date)

By Checking the box, you agree that the  
Above signature is a valid electronic signature

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.