## New Generation Singers Medical Consent and Permission Form

As legal guardian of	, I give permission for said
	's name)
person to go on the New Generation Tour	•
The following are physical/mental condition	ons of which the sponsors should be aware,
including allergies:	
5 5	
The following are medications/treatments used to manage these conditions:	
<u>Insurance</u>	
Company Cal	rrier of insurance
5 " N I (6 N I	
Policy Number/Group Number	
(guardian's signature)	(date)
	_
Emergency Contact Phone Number	

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.