

Northwest Guilford High School PTSO
2018 Powder Puff Registration, Consent, and Release Form

Please Print Legibly

Registration:

Name of Minor: _____ Date of Birth: ____/____/____

Parent/Legal Guardian Name: _____

Address: _____ City: _____ Zip: _____

Parent Phone Number: _____

Secondary Emergency Contact Name: _____ Phone: _____

Consent:

I am the parent/legal guardian of the above-named minor. I give permission for this minor to participate in the Northwest Guilford High School PTSO Powder Puff Game on 10/3/18 and practices on 9/26/18, 9/27/18, 10/1/18, and 10/2/18 (or on dates rescheduled due to inclement weather if necessary) to be held at Northwest Guilford High School. I, as parent or guardian of the minor, do hereby, for my child, Myself, my heirs, executors and administrators, remise, release and forever discharge Northwest Guilford High School PTSO and all Northwest Guilford High School PTSO officers, employees, volunteers, and agents of each of the foregoing, acting officially otherwise, from any and all claims, demands, actions or causes of action on account of referred.

I understand that participation in this activity includes game play that involves risks and dangers. I fully accept and assume all such risks. And I do hereby certify that to the best of my knowledge and belief said minor is in good health. In case of illness or accident, permission is granted for emergency treatment to be administered. It is further understood that the undersigned will assume full responsibility for any such action, including payment of costs. I hereby advise that the above-named minor has had the following allergies, medicine reactions or unusual physical condition which should be made known to a treating physician. (If none, please write the word 'none'.)

Allergies and Known Medical Conditions:

Photo Release:

I grant my authorization and consent for NWHS PTSO to photograph the above-named minor as a participant in the Powder Puff Game and/or practices. These photographs may be distributed to other participants and/or posted on social media.

Parent's Signature

Printed Name

Today's Date

Each participant must turn in a signed, completed original form before the Powder Puff Practice Meeting on 9/26/18. Forms may be turned in for NWHS PTSO in the school office.