

TBA-SA Parental Consent Form

Name of Event: _____ Location: _____
City State

Date of Event: ____ / ____ / ____ Promoter's Name: _____

I, _____ Parent/Legal Guardian of
Parent's Legal Name - Printed

_____ born on ____ / ____ / ____
Minor's Full Legal Name - Printed

grant permission to _____
Temporary Guardian's Full Legal Name - Printed

to act as Temporary Guardian for the dates of June 3, 4, and 5, 2011.

"I authorize the temporary guardian listed above to sign any paperwork, on my behalf, required by the promoter and sanctioning body for the event listed above and my consent to make any decisions concerning medical needs for my child, while in his/her care for the dates listed above."

Parent/Legal Guardian's Signature Date: _____

Notary: