

SPRINGFIELD COLLEGE 2008 NGWSD CONSENT FORM

A parent or guardian must complete the following consent form for each minor participating in ANY Springfield College NGWSD events on February 9, 2008.

I _____ give _____ my permission to attend
Parent/guardian Minor

and fully participate in the SPRINGFIELD COLLEGE GIRLS AND WOMEN IN SPORTS DAY. I have attached any special physical limitations and/or medication required, if any. I also hereby authorize Springfield College permission to arrange for, and provide medical care in the event the applicant is injured or disabled.

Signed: _____ Date: _____

Insurance Company: _____ Policy Number: _____

Emergency Telephone: _____ Relationship: _____

Please check one:

I give permission to Springfield College to photograph my child and use any photographs in which my child appears for publicity purposes.

I do not give permission to Springfield College to photograph my child and use any photographs in which my child appears for publicity purposes.

Please bring this form on February 9, 2008 to NGWSD.