



Gary Sinise Foundation Letter of Consent To attend and travel with someone other than Parent or Guardian Medical Power of Attorney

Please print clearly:

I,, as parer	nt or guardian of minor child/children:
	,
give my authorization for the above child/children to trave	el to and attend Gary Sinise Foundation's
Snowball Express 2018 with	, who also has my express
permission to authorize and sign for emergency medical	care and/or treatment that may be required
in the event I cannot be reached.	
This consent is in effect from December 8, 2018 to Dece	mber 12, 2018.
Signature of Parent/Guardian Date signed	
Home phone number	
Cell phone number	
THIS FORM MUST BE NOTARIZED	
THE STATE OF)	
COUNTY OF)	
BEFORE ME, on this day per to me (or proved to me under oath or through other document) to be the person whose name is subscrifirst being duly sworn by me, on their oath acknowledged Attorney for the purposes of consideration therein expressions.) (description of identity card or ibed to the foregoing instrument. He/she, after that he/she executed this Medical Power of
Given under my hand and seal of office this	
day of, 2018	
	Notary Public in and forCounty
SEAL	The State of My Commission expires:

Please access your on-line family record and