



*As each one has received a gift, minister it to one another, as good stewards of the manifold grace of God. 1 Peter 4:10*

# AFFIDAVIT OF PARENTAL CONSENT

**For use by a minor child attending an Eight Days of Hope event without a parent or guardian**

I/we, (name of parent(s) or guardian) \_\_\_\_\_

(relation to minor) \_\_\_\_\_ of said minor child, do hereby authorize

(name of temporary guardian) \_\_\_\_\_

(relation of temporary guardian to minor) \_\_\_\_\_ of said minor child to attend as guardian of

(name of minor child) \_\_\_\_\_, age of minor: \_\_\_\_\_

From: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ TO: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

I/we (\_\_\_) HAVE; (\_\_\_) DO NOT HAVE Major Medical Insurance that will cover this child for medical treatment;

and I/we (\_\_\_) AUTHORIZE; (\_\_\_) DO NOT AUTHORIZE the above named person to make medical treatment decisions for the minor child listed above if needed.

If not, we have provided Emergency Contact Information below:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Alternate Name and Phone: \_\_\_\_\_

Signature(s): \_\_\_\_\_ : \_\_\_\_\_

**(To be signed in front of a Notary Public only)**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Signature of Notary Public: \_\_\_\_\_

Notary Public in and for the County of \_\_\_\_\_, and the state of \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

*Affix Notary Seal at the right side of page*