

TREK FOR TREASURE



Informed Consent for Minors

Team Name: _____

Please list the first and last names of children under the age of 18 participating on your team for whom you are the parent or legal guardian.

I declare that I am the parent/legal guardian of the child(ren) listed above and that I assume responsibility for the health and safety of my child(ren) and will not hold United General District 304 responsible for any health problems or injuries that may occur as a result of their participation in Trek for Treasure.

Signature Date

Printed Name Relationship to Minor(s)