

Medical Authorization and Liability Release Form

We, the parents or guardians of _____ give permission to Chris McGolden or Allison Taylor to enter this individual at any hospital in case of an emergency situation.

We also excuse Chris, Allison, and the fairgrounds and their representative from any and all liability which may occur from any illness, injury or accident.

Please list any medications the individual listed above is taking:

Parent or Guardian's Signature

Notary Public

Subscribed and sworn to this _____ day of _____, 20_____.

My commission expires _____