Medical Authorization for Minors

I, _____________________________________________________, the parent of or legal guardian of
__________________________________________, a minor, do hereby authorize any one or more of
_______________________________________, ________________________________________ or
______________________________, as agents for myself in my absence or incapacitation to consent to any x-ray
examination and anesthetic, medical or surgical diagnosis or treatment and medical care which is deemed advisable
by and is to be rendered under the general or special supervision of any physician or surgeon licensed under the
provisions of the Medical Practice Act on the medical staff of any hospital whether or not such diagnosis or
treatment is rendered at the office of said physician or at said hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being
required but is given to provide authority and power on the part of the aforesaid agents to give specific consent to
any and all such diagnosis, treatment or hospital care which aforementioned physician in the exercise of his or her
best judgement may deem advisable.

I hereby authorize any hospital which has provided treatment to the above-named minor to surrender physical
custody of such minor to the above-named agents upon the completion of treatment.

These authorizations shall remain effective until ___________________, ______________.

Signature of Parent or Legal Guardian: ________________________________________________

Date: ____________________________________________________________________________

Please note any specific health plan or insurance information such as membership or policy numbers on the
back of this form.

Copies of this form, duly executed, should be in the possession of the named minor; at least one adult named
in the document and present at the event; and the parent or guardian executing the Medical Authorization.

The SCA requires minor participants (i.e., those having to have waivers) whose parents or legal guardians are
not present at the event to have a valid Medical Authorization form. The SCA recommends use of the Medical
Authorization for all minors whose parents or legal guardians are present.