



## **Parental Consent for Minor Attendees**

This form is required for attendees who are under 18 years of age as of the start of the event for which it is being utilized

**Disclosure**: North Carolina Anthropomorphic Society Inc, (hereto NCAS), is a nonprofit organization that hosts social and recreational events and community resources for its members who are enthusiasts of anthropomorphized animals such as cartoon characters, mascots, and such fantasy creatures. Membership is open to all interested parties and there is no process by which members are screened or otherwise evaluated prior to admission. Neither NCAS, our venues, our vendors, our contractors, nor our content hosts bear any responsibility whatsoever for the conduct or actions of any individual member. Every member is understood to be present at our events and on our hosted services solely at their own risk.

Event This form is being used for:	Date of the event	•	
Minor legal Name:	Minor Birthdate:		
Parent/Guardian legal Name:	Guardian Telephone:		
Please detail any <b>Medical Information</b> or special needs of the minor	on the back of this form.		
Statement of Parental Consent and Indemnifica "I represent that I am the parent or legal guardian of the minor to attend NCAS events or utilize NCAS hosted se	above-named minor, and I he	· ·	e-named
"I <b>agree</b> to indemnify and hold harmless NCAS, its venu personal injuries or other damages or equity arising from NCAS hosted services. <b>I agree also</b> to accept full respo NCAS events and on NCAS hosted services. <b>I agree also</b> activities of the above-named minor, or to convey any m	n the above-named minor's ac nsibility for the actions and be so that NCAS bears no respor	tivities at NCAS events or in utilizing haviors of the above-named minor assibility to monitor the whereabouts	ng · at s or
"I have read the above one (1) page Statement of Parer am voluntarily signing it without any inducement or repre venues, its vendors, its contractors, or its content hosts.	esentation whatsoever from ar		
SIGNATURE (Parent or guardian):		Date:	
Notary Statement:		(To be completed by a Notary	Public)
BEFORE ME, the undersigned authority, on this day per Known to me to be the person whose name is subscribe oath, acknowledge that he/she had executed the same foregoing statements are true and correct.	ed to the foregoing instrument,	and having been by me first duly s	
GIVEN under my hand and seal of office, this	day of	, 20	
Notary Public in and for Co	ounty, in the state of	·	
(Signature of Notary)			
(Printed Name of Notary)			
(Commission Expiration Date)	(Seal)	Rev. 1.2 (20)	20-03-06)