

Rev. 1.4 (2020-03-07)



(Commission Expiration Date)

## **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. General 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.

	Minor Birthdate:		Minor logal Namo:
			Minor legal Name:
	Guardian Telephone:		Parent/Guardian legal Name:
	of this form.	ial needs of the minor on the bac	Please detail any <b>Medical Information</b> or speci
s as stated below.		al guardian of the above-r	Statement of Parental Consent a "I represent that I am the parent or legminor to attend NCAS events or utilize
AS events or in utilizing above-named minor at nitor the whereabouts or	e-named minor's activitier the actions and behavions AS bears no responsibili	equity arising from the abo o accept full responsibility ervices. I agree also that N	"I <b>agree</b> to indemnify and hold harmles personal injuries or other damages or NCAS hosted services. <b>I agree also</b> to NCAS events and on NCAS hosted se activities of the above-named minor, or
		ducement or representation	"I have read the above one (1) page S am voluntarily signing it without any invenues, its vendors, its contractors, or
2:		:	SIGNATURE (Parent or guardian):
e completed by a Notary Public)			Notary Statement:
	regoing instrument, and	name is subscribed to the secuted the same for the p	BEFORE ME, the undersigned authoric Known to me to be the person whose to oath, acknowledge that he/she had exforegoing statements are true and corrections.
_, 20	day of	ice, this	GIVEN under my hand and seal of office
·	e state of	County, in	Notary Public in and for
		_	(Signature of Notary)
		_	(Printed Name of Notary)
een by me first duly swo	regoing instrument, and pose and consideration to day of	name is subscribed to the recuted the same for the prect.	BEFORE ME, the undersigned authoric Known to me to be the person whose to oath, acknowledge that he/she had exforegoing statements are true and corrections. GIVEN under my hand and seal of office Notary Public in and for

(Seal)