

# His Kids Permission and Waiver of Liability Form for the Brazoria County Fair Parade

I, \_\_\_\_\_, give my permission for \_\_\_\_\_ to ride on the His Kids float in the Brazoria County Fair Parade. I understand that if I have a concern regarding my child's safety, I may ride on the float with my child.

The undersigned parent or guardian assumes the responsibility and the costs connected with the treatment for any injury that may occur while riding on the parade float. As a parent or guardian, I do herewith authorize treatment under the direction of any licensed physician of the following minor in the event of a medical emergency which, in the opinion of the attending physician, may endanger his or her life, cause disfigurement, physical impairment, or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me by phone at the number listed below.

Name of minor \_\_\_\_\_

Relationship \_\_\_\_\_

(son/daughter/grandson/granddaughter, etc)

This release is intended for the duration of the Brazoria County Fair Parade only. This permission and release form is completed and signed of my own free will.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

Circle relationship to child—Father—Mother—Legal Guardian

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Physician \_\_\_\_\_ Phone \_\_\_\_\_

Specific Medical Allergies, Illness, or Conditions \_\_\_\_\_

Other Emergency Contact Person \_\_\_\_\_

Relationship to Child \_\_\_\_\_

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

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