

CONSENT TO MEDICAL TREATMENT

If the above named participant needs emergency medical treatment and no parent/legal guardian can be reached, consent is hereby granted for such emergency treatment as may be considered necessary in the opinion of the attending physician.

Electronic Signature Agreement: By selecting the "I have read and accept" button, you are signing this Agreement electronically. You agree your electronic signature is the legal equivalent of your manual signature on this Agreement. By selecting "I have read and accept" you consent to be legally bound by this Agreement's terms and conditions. You also agree that no certification authority or other third-party verification is necessary to validate your E-Signature and that the lack of such certification or third-party verification will not in any way affect the enforceability of your E-Signature.

Parent/Legal Guardian Signature*	
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<i>I/We have read, understand and agree to comply with the Consent to Medical Treatment release as outlined above.</i>	
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