Camp Chawanakee Authorization and Consent for Minor

Pursuant to California Civil Code Section 25.8
Pursuant to California Penal Code Section 12552

Name of Minor	Unit Number	Date of Birth

The Undersigned do hereby authorize the Camp Chawanakee Director or such substitute as he may designate as our agent to consent to any X-ray examination, anesthetic, medical, dental or surgical diagnosis or treatment and hospital care for the above minor. Such treatment must be deemed advisable by and rendered under the general or special supervision of any physician or surgeon licensed under the provision of the Medicine Practice Act or any dentist licensed under the Dentist Practice Act. This diagnosis or treatment may be rendered at the office of said physician or dentist, at a hospital, Scout camp or elsewhere.

The undersigned also grant permission for the use of a horse by the above minor under the supervision of a Camp Chawanakee wrangler staff.

Finally, the undersigned authorize the Camp Chawanakee rifle range officer to furnish a firearm to the above minor for the purpose of safe handling instruction and for use on a supervised range.

The authorization will remain effective while the above minor is en route to or from and is involved in any Boy Scout program activity of the Sequoia Council, Boy Scouts of America, unless revoked in writing by the undersigned, and delivered to the aforesaid agent.

Father or Guardian	Mother or Guardian

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Daytime Phone: _____

Must be Notarized or Signed by Two Witnesses

Witness	**Witness**

Notarization: