## Parental Authorization to Consent to Treatment of a Minor, 2024-2025

(Parent or Legal Guardian Here-in "Parent")	(Here-in" Minor")
Westgate Chapel School (Here-in "Organization")	Westgate Chapel Preschool (Here-in "Designated Agent")
In the case of emergency, the above-named Pai into the care of the above Organization, while t sponsored by the Organization, and for the wel	he Minor participates in an activity
The Parent does hereby authorize the Designat any X-ray examination, anesthetic, medical or scare which is deemed advisable by, and is to be supervision of, any physician and surgeon licer in which the medical care is being sought and consent to any X-ray examination, anesthetic, of be rendered to the Minor by any dentist license which the dental care is being sought.	surgical diagnosis or treatment and hospital e rendered under the general or special used under the laws of the State or Country on the medical staff of any hospital; or to dental or surgical diagnosis or treatment to
It is understood that this authorization is given anesthetic, medical or surgical diagnosis or tre is given to provide authority and power on the any and all such examination, anesthetic, diagn aforementioned surgeon, physician and/or der judgment, may deem advisable.	atment and hospital care being required but part of the Agent to give specific consent to losis, treatment, or hospital care in which the
In the case of emergency, the Parent hereby au treatment to the Minor to surrender physical c completion of treatment.	
The Parent hereby agrees to fully pay all costs Minor by the Agent under this Authorization.	of medical or dental care incurred for the
Please understand that we will do our very bes as soon as possible.	st to notify the parent(s) and/or guardian(s)
These authorizations shall remain effective unt delivered to said Agent.	til/unless sooner revoked in writing
Dated	
Parents or Legal Guardians	