Parental consent Fo	orm:		
l,	, hereby appoint	a	s the temporary lawful
Parent Attending guardian guardian of my child for the period of Oct. 10, 11, 12, 2025 while child's name			
attending Operation Hidden Ward at the former Broaddus Hospital, Philippi, WV.			
I assume the responsibility ar management/ownership, eve expenses arising out of the us	nt sponsors and their respe		arketing, Event venue event attendees against any claims or
insurance covering my child r While security personnel may solely responsible for the safe I, the parent, therefore assum manage/ownership, event spe arising from any loss suffered	nor my child's property, and be available for the purpose wheeping of his/her own properts to independ on sors and their respectived by my child. I understand to hold Best of USA Markets	I it is our sole responsi- se of safeguarding the operty while attending t mnify, defend and hold employees and event that the nature of airso eting, event sponsors,	t/ownership, event sponsors maintain bility to obtain such insurance if needed. general public at the Event, my child is the Event during and after Event hours. It Best of USA Marketing, Event venue attendees harmless against any claims off game may cause serious injuries, loss event venue management/ownership inces.
to conduct himself/herself appevent sponsors he/she may be whole or in part. Without limit without the express, prior written of illegal drugs shall also resumpection of my child's wares	propriately in the opinion of be asked to leave the Event ting the generality of the ab tten permission of Best of L ult in immediate expulsion. s by a duly authorized ager fy and hold Best of USA Ma	Best of USA Marketing at any time without are bove, the possession of USA Marketing shall result of Best of USA Marketing, event sponsor	courteous manner. Should my child fail g, Event venue manage/ownership, and my right to a refund or fees, either in f any firearm or weapon at the Event sult in immediate expulsion. Possession se provisions, I hereby grant reasonable eting. I, the parent and/or the legal rs, Event venue manage/ownership, and ms.
Parent Printed Name	Signature		Date
Guardian Printed Name	Signat	ure	 Date
Acknowledgment:			
State of County of			
On	he	fore me	
(date)		(print	name and title of Officer)
personally appeared			, who proved
to me on the basis of satisf instrument and acknowledge	(print pers factory evidence to be the ged to me that he/she/the is/her/their signature(s) o	son(s) name(s)) e person(s) whose na y executed the same on the instrument the	me(s) is/are subscribed to the within
I certify under PENALTY OF is true and correct.	FPERJURY under the law	s of the State of	that the foregoing paragraph
WITNESS my hand and offi	cial seal.		

(Seal)

Signature _____