

PARENTAL POWER OF ATTORNEY FORM

Ι,	, am the parent/legal guardian of	("Child"). I understand
	aint George ("TSG") is a father/son organization and my	
generally rec	uires fathers to accompany their children to all TSG Troop	activities. I hereby authorize
	("Agent") to act on my behalf and on behalf of my	Child in connection with my
Child's parti	cipation in TSG and TSG Troop activities and accompany	my Child to all TSG Troop
activities. I	specifically authorize my Agent to enter into agreements and	d contracts with TSG and my
1	concerning my legal rights and the legal rights of my Child,	<i>C</i> ,
	isents, releases, and indemnification agreements that may	, ,
legal rights	and obligations, including without limitation pre-injury re	leases, indemnifications, and
	ss agreements from and against any claims, causes of action	
1 .	negligence and/or (b) that may otherwise arise out of or re-	
_	participation in TSG and TSG Troop activities. TSG an	,
1	o communicate and deal with my Agent on my behalf and	
	er as TSG or my TSG Troop would otherwise deal with m	•
	SG Troop, and any of their respective agents, executive	
	rustees, employees, officers, contractors, representatives,	•
	hereof dealing with my Agent shall not be required to inqu	
	on as to, the authority of my Agent to take any action on bel	-
with my Chi	ld's participation in TSG, my TSG Troop, or any activities :	related thereto.

In the event of an emergency, I authorize my Agent to consent to medical treatment, including hospitalization, anesthesia, surgery, or medicine for my Child.

In consideration of the risks involved, the benefit my Child receives from his participation in TSG and TSG Troop activities, and acknowledging that my Child's participation in TSG and TSG Troop activities is voluntary, I agree to indemnify, hold harmless, and release TSG, my TSG Troop, and their respective agents, executive committee, board members, directors, trustees, employees, officers, contractors, representatives, volunteers, and heirs and successors thereof from any and all claims, causes of action, and/or liabilities arising out of or resulting from Agent's actions and/or my Child's participation in TSG and TSG Troop activities.

I further agree to instruct my Child to follow all safety instructions given by the leaders and volunteers of my TSG Troop during any TSG and TSG Troop activities.

THE AGENT, BY ACCEPTING OR ACTING UNDER THIS AGREEMENT, ASSUMES THE FIDUCIARY AND OTHER LEGAL RESPONSIBILITIES OF AN AGENT.

MY AGENT (ATTORNEY IN FACT) SHALL HAVE THE POWER AND AUTHORITY TO PERFORM OR UNDERTAKE ANY ACTION I COULD PERFORM OR UNDERTAKE IF I WERE PERSONALLY PRESENT.

The Agent acknowledges and agrees to comply with all of the policies and procedures set forth in TSG's Officer's Manual. The Agent further acknowledges that Agent is or will become a member of the Child's local TSG Troop and will remain in good standing so long as this Agreement remains in full force and effect or so long as Child participates in TSG and TSG Troop activities.

In consideration of the risks involved, the benefit the Child and Agent receive from their participation in TSG and TSG Troop activities, and acknowledging that the Child's and Agent's participation in TSG and TSG Troop activities is voluntary, the Agent agrees to indemnify, hold harmless, and release TSG, my TSG Troop, and their respective agents, executive committee, board members, directors, trustees, employees, officers, contractors, representatives, volunteers, and heirs and successors thereof from any and all claims, causes of action, and/or liabilities arising out of or resulting from the Child's and/or the Agent's participation in TSG and TSG Troop activities.

If any provision herein is held to be illegal, invalid, or unenforceable under present or future laws, such provision (the "Struck Provision") shall be fully severable and this instrument shall be construed and enforced as if the Struck Provision is not a part thereof. The remaining provisions thereof shall remain in full force and effect, and in lieu of the Struck Provision, there shall be added automatically as a part of this instrument a provision as similar in its terms to the Struck Provision as may be possible and be legal, valid, and enforceable.

Parent/Legal Guardian Name (Please Print):	
Parent/Legal Guardian Signature:	Date:
Agent Name (Please Print):	
Agent Signature:	Date:

STATE OF	§				
COUNTY OF	\$ \$				
This instrument v		ed before me on the t/Legal Guardian").	day of	, 20, by	
	Notary Public, State of				
STATE OF	\$ \$				
COUNTY OF	\$				
This instrument v		ed before me on the t'').	day of	, 20, by	
	Notary Public, State of				
This document ha	as been verifi	ed and recorded b	y the TSG Troo	op Captain:	
TSG Troop Captain Nam	e (Please Print):		Tro	oop#:	
TSG Troop Captain Signa	iture:		Da	nte:	
*Original to be kept and file	d by Troop Capta	in with copy to Parent /	Legal Guardian and	Agent	