

**Indiana State Fair Street Vault  
August 16, 2007  
Parental Consent Form / Waiver**

**\*\*\*Competitors 18 yrs of age and under MUST have a parent or legal guardian complete the parental release\*\*\***

\*\*\*Competitors over the age of 18 may fill out a waiver on site\*\*\*

For Additional Information Contact Collin Gayde at:  
Cell (812) 239-3610  
E-mail: [collin@pvelite.net](mailto:collin@pvelite.net)

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Parental Release/Consent form

I hereby authorize the organizers of the Indiana State Fair Street Vault Competition and the Indiana State Fair to act for me according to their best judgment in any emergency requiring medical attention for

\_\_\_\_\_  
(Competitors name)

I hereby give my permission to the physician selected by the organizers of the Indiana State Fair Street Vault Competition and the Indiana State Fair to undertake appropriate medical steps toward the welfare of my child, as deemed necessary by the situation.

I hereby waive and release the organizers of the Indiana State Fair Street Vault Competition and the Indiana State Fair of any and all Liability for any injuries or illnesses incurred while participating at the above mentioned event.

Parent or Legal Guardians

Signature \_\_\_\_\_ Date \_\_\_\_\_