

Event This form is being used for:

North Carolina Anthropomorphic Society Inc.

Parental Appointment of Guardian (for Accompanied Minor with guardian other than a parent)

(for Accompanied Minor with guardian other than a parent)

This form is required for attendees who are under 16 years of age as of the start of the event for which it is being utilized and will be accompanied by a guardian other than their parent.

Date of the event:

Disclosure: North Carolina Anthropomorphic Society Inc, (hereto NCAS), is a nonprofit organization that hosts social and recreational events and community resources for its members who are enthusiasts of anthropomorphized animals such as cartoon characters, mascots, and such fantasy creatures. General Membership is open to all interested parties and there is no process by which members are screened or otherwise evaluated prior to admission. Neither NCAS, our venues, our vendors, our contractors, nor our content hosts bear any responsibility whatsoever for the conduct or actions of any individual member. Every member is understood to be present at our events and on our hosted services solely at their own risk.

Minor Legal Name:	Minor Birthdate:		
Parent Legal Name: (Printed Clearly)	Parent Telephone:		
Appointed Guardian Legal Name: (Printed Clearly)	Parent Telephone:	Parent Telephone:	
Statement of Parental Consent and Indemnification "I represent that I am the parent or legal guardian of the above listed Minor to attend NCAS events or utilize No The Appointed Guardian shall accept full responsibility hosted services. I agree also that NCAS bears no response on the convey any messages from me or from any other particular to the particular transfer of	ne above-named minor ("Minor"), and CAS hosted services while accompany for the actions and behaviors of the ponsibility to monitor the whereabou	nied by the listed Appointed Guardian. e Minor at NCAS events and on NCAS	
"I have read the above Statement of Parental Consent voluntarily signing it without any inducement or repres vendors, its contractors, or its content hosts."			
SIGNATURE (Parent):		Date:	
Notary Statement:		(To be completed by a Notary Public)	
BEFORE ME, the undersigned authority, on this day p Known to me to be the person whose name is subscri oath, acknowledge that he/she had executed the same foregoing statements are true and correct.	bed to the foregoing instrument, and	having been by me first duly sworn an	
GIVEN under my hand and seal of office, this	day of	, 20	
Notary Public in and for	County, in the state of	·	
(Signature of Notary)			
(Signature of Notary) (Printed Name of Notary)			