

MINOR PERMISSION SLIP

Date _____

We the undersigned being the parents (guardians) of _____ ,
do hereby give permission to _____ to transport him/her to
Mexico for the Hands of Mercy trip on _____ .

If any medical actions are deemed necessary for our child’s well-being during this trip, the above
named adult is authorized to make any such decisions necessary as related to his/her health.

Our medical insurance is with _____ Policy # _____

Parent (Guardian) Signature

Parent (Guardian) Signature

Print Parent name

Print Parent name

Phone Number

Phone Number

Parents: Please have this notarized by a Notary Public and returned to Rick Carter at least 3 days
prior to the trip.

NOTARY

STATE OF CALIFORNIA, COUNTY OF _____ ON _____ before

me, the undersigned, a Notary Public in and for said State, personally appeared

_____ and _____
personally know to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose
name(s) is/are subscribed to the within instrument and acknowledge to me that he/she/they executed the
same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the
person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature _____

NAME (typed or printed)

NOTARY SEAL