2009 Medical Consent and Release Form

United Way of Amarillo & Canyon

United Way of Amarillo & Canyon (hereafter referred to as "Sponsor") volunteer training takes place at The Inn of the Mountain Gods Resort and Casino in Ruidoso, New Mexico July 22 – 24, 2009. United Way of Amarillo & Canyon is hereby authorized by the undersigned to:

(i) obtain and consent to medical, dental, and other such services;
(ii) obtain admission of the undersigned to any clinic, hospital, or other such facility;
(iii) consent of the undersigned to medical procedures and services, including surgery, administration of anesthesia and other treatments; and
(iv) perform or authorize any other action on behalf of the undersigned if he/she is not capable of making decisions

The services, treatments, and other items referred to in (i), (ii), (iii), and (iv) above are hereafter referred to as "health care".

Physicians, dentists, nurses, hospitals, clinics, and any other person(s) or entities engaged in deliverance of health care to the undersigned shall be entitled to rely on any consent and authorization given by Sponsor.

Volunteer Name: _____
First Middle Last

Medical Insurance Company: _____

Policy/Certificate ID: _____

Insurance Company Phone Number: _____

List any known allergies: _____

List any medications that a Physician should know about if an injury occurred (optional):

_____

List any known medical condition(s): _____

_____

_____

_____

Emergency Contact Information: _____
Name Relationship

_____
Phone Address