**Mohegan Volunteer Ambulance Corps**

**Youth Corps**

**Parental Consent Form**

Name of Applicant

I, , am the legal guardian of the above named minor applying to the Mohegan Volunteer Ambulance Corps - Youth Corps (MVAC-YC). I give my consent for my child to apply and participate in the activities of the MVAC Youth Corps and perform the duties associated with those activities. I certify, to the best of my knowledge, that my child is medically capable of performing the activities associated with MVAC Youth Corps, as stated in the *MVAC Youth Corps Bylaws*. For the sole purpose of determining my child’s suitability for affiliation with this organization, I grant permission to the MVAC and any law enforcement agency that they deem appropriate, to conduct a background check, including but not limited to verification of the information contained in this application. I understand that there may be some physical and mental requirements for rendering emergency medical care as a member of the ambulance corps. I understand that at all times there will be adult supervision of all activities. As the legal guardian I may decide to limit this applicant’s activities at any time.

(Signature of Legal Guardian)

\*THIS FORM MUST BE NOTARIZED\*

Signed and sworn to before me this day of (SEAL)

Notary Public My commission expires on: