

**REGION 17 YWIH
PERMISSION OF PARTICIPATION
PARENT/GUARDIAN
YOUNG WOMEN IN HARMONY**



I, _____ parent/guardian of _____
Who is participating in the Young Women In Harmony Rising Star Quartet
Contest, sponsored by Lake Erie Region 17; a body of Sweet Adelines
International, hereby gives permission for _____,
To act as her sponsor/chaperone in accordance with Sections 4 and 5 of the
Agreement of the Parent or Guardian. I give this permission so that she can
attend and participate in:

All Events and activities between _____ and _____
(date) (date)

- ♪ YWIH Quartet Briefing
- ♪ YWIH Encore Club Sponsored Mixer
- ♪ YWIH Quartet Competition
- ♪ YWIH Pizza Party

In the event of a medical emergency, I give my permission to the physician
selected by the sponsor/chaperone to provide all necessary and appropriate
medical care to the minor child including but not limited to hospitalization,
injections, anesthesia, and surgical procedures.

Date

Parent/Guardian Signature

I agree to act as sponsor/chaperone of the above-named minor according to
the terms and limitations described herein.

Date

Sponsor/Chaperone Signature