



The Navy League of Canada



PARENTAL/GUARDIAN APPROVAL FOR CADET EXERCISE

Activity: \_\_\_\_\_ Date(s) of Activity: \_\_\_\_\_

Location: \_\_\_\_\_ Time(s) of Activity: \_\_\_\_\_

**Cadet Information:**

Name: \_\_\_\_\_ Parents' or Guardians' Name: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_ Alternate Phone: \_\_\_\_\_

\_\_\_\_\_ Sex: M \_\_\_\_ F \_\_\_\_

Birth Date (D/M/Y) \_\_\_\_\_ Swimmer: Y \_\_\_\_ N \_\_\_\_

**Medical Information:**

Alberta Health Care: \_\_\_\_\_

Allergies: \_\_\_\_\_

Taking Medication? Yes \_\_\_\_ No \_\_\_\_ If "Yes", Describe \_\_\_\_\_

Other Information: \_\_\_\_\_

Are we authorized to give your son/daughter/ward Tylenol if required? Yes \_\_\_\_ No \_\_\_\_

**Parental Declaration:**

1. I hereby give my consent for my son/daughter/ward to attend the above activity.
2. Authority is also hereby granted for my son/daughter/ward to travel in private, commercial or military vehicles, ships or aircraft as deemed necessary by the Navy League.
3. I also certify that my son/daughter/ward is in good physical condition and health and that authority is granted for him/her to receive emergency, medical, or dental treatment if need arises.

\_\_\_\_\_ dated \_\_\_\_\_ at \_\_\_\_\_  
Signature of parent/guardian (d/m/y) (place)

Notes:

1. To be completed by parent/guardian and submitted to the Commanding Officer. All information is confidential. Please print, in ink.
2. This form, along with a copy of the Cadet's medical form is to accompany the corps on the exercise in question.