

Queen City Figure Skating Club  
Emergency Medical Authorization Form  
*Please complete 1 form for each skater using Queen City Club Ice*

Name \_\_\_\_\_ DOB if under 18 \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Phone \_\_\_\_\_

**IF SKATER IS A MINOR: Parent or Guardian name:**

Name \_\_\_\_\_ Relationship: \_\_\_\_\_ Home Phone \_\_\_\_\_  
          First                      Last

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Pager \_\_\_\_\_

**Emergency Contact:** at least 1 required for all skaters (different from name given above)

Name \_\_\_\_\_ Relationship: \_\_\_\_\_ Home Phone \_\_\_\_\_  
          First                      Last

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Pager \_\_\_\_\_

OPTIONAL: Facts concerning the skater's medical history, including allergies, medications being taken, using contact lens, and any physical impairment(s) to which emergency personnel should be alerted.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Either sign Part I or Part II below, not both*

**PART I: TO GRANT CONSENT FOR TREATMENT**

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for (1) any treatment deemed necessary by a licensed physician or dentist; and (2) the transfer of the skater to any hospital reasonably accessible. The authorization does not cover major surgery unless the medical opinion of two licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to performance of such surgery.

Date \_\_\_\_\_ Signature of Skater (or parent for skater under 18) \_\_\_\_\_

*Either sign Part I or Part II, not both*

**PART II: REFUSAL OF CONSENT FOR TREATMENT**

I do **NOT** give my consent for emergency treatment for the above named skater. In the event of an illness or injury requiring emergency treatment, when reasonable attempts to contact me have been unsuccessful, I wish the responders to take the following action:

\_\_\_\_\_

Date \_\_\_\_\_ Signature of Skater (or parent for skater under 18) \_\_\_\_\_