

# Lakota Stallions Youth Football and Cheerleading

8080 Beckett Center Drive  
Suite #118  
West Chester, OH 45069  
513-755-5771

[www.lakotastallions.com](http://www.lakotastallions.com)

Grade \_\_\_ # \_\_\_

## Medical Treatment and Transport Release

I \_\_\_\_\_ as parent/legal guardian  
Please Print

of \_\_\_\_\_, and in the event  
Please Print Child's Full Name

of a medical emergency to said child in my absence, I hereby grant permission for medical treatment of that emergency by qualified medical professionals and, if needed, transport of said child to the most appropriate medical facility.

\_\_\_\_\_  
Parent/Guardian – Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness – Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness – Print

### **Insurance Information (optional)**

Insurance Company \_\_\_\_\_

Name of Insured \_\_\_\_\_

Subscriber ID/Group number \_\_\_\_\_

Card Number \_\_\_\_\_

Plan Number \_\_\_\_\_

Child Social Security # \_\_\_\_\_

Other \_\_\_\_\_

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