



CHAPERONE RELEASE FORM

All members and guests age 18 and under who are not accompanied by a parent must complete the Chaperone and Medical Release forms and return both forms with the Registration Form.

My chaperone will be _____. I hereby agree to allow _____ (name of chaperone) to serve as the chaperone for my child _____. The chaperone has my permission to act in any medical or disciplinary activities as necessary during the 54th Annual General Children of the Confederacy Convention, including travel to and from the Convention, in Fredericksburg, Virginia, July 24-26, 2008.

(Parent's Signature)

(Date)

I hereby agree to be the chaperone of the individual named on this registration form for the duration of the 54th Annual General Children of the Confederacy Convention, including travel to and from the Convention, in Fredericksburg, Virginia,, July 24-26, 2008.

(Chaperone's Signature)

(Date)