



## UNDER THE AGE OF 18 5B8 CONSENT AUTHORIZATION FOR MEDICAL TREATMENT

If you are under 18 years of age, a parent or guardian must sign and agree to the terms and conditions of the 2012-2013 License Agreement and complete the Consent Authorization for Medical Treatment form.

Please fill out and return this form to the Housing Services Office.

### STUDENT'S INFORMATION

Last Name	First Name	Middle Name	Campus Identification Number (CIN)
Permanent Address	Street	City	State
			Zip Code
			Country
			MM / DD / YY
Permanent Phone Number	Message Phone Number	*Age	Birth Date
Personal Email Address	CSULA Email Address		

### CONSENT AUTHORIZATION FOR MEDICAL TREATMENT

The undersigned parent or guardian of \_\_\_\_\_ who is \_\_\_\_\_ years old, hereby authorizes the staff of the California State University, Los Angeles Housing Services Office, as agents of the undersigned, to consent to any medical care including X-ray examination, anesthetic, medical or surgical diagnosis or treatment, and hospital care under the general or special supervision and upon the advice of or to be rendered by a physician and surgeon licensed under the Medical Practice Act. This authorization is given in advance of any special diagnosis, treatment or medical care being required, and pursuant to the provisions of Section 6900 et seq of the California Family Law Code. Note: Licensee must be 18 years old or will turn 18 during the quarter in which he or she shall be a resident.

\_\_\_\_\_  
Signature of Parent of Guardian Date

### TERMS AND CONDITIONS

I have read and understand the "CSULA Housing Services License Agreement Terms & Conditions." I have also read and understand the Housing Services Payment Schedule and Housing Services Student Guide. I agree to the terms and conditions of all the forenamed documents and agree to abide by the "CSULA Housing Services License Agreement Terms and Conditions."

Signature of Student	Date
Name of Parent/Guardian (Please Print)	
Signature of Parent/Guardian if student is under 18.	Date