

AUTHORIZATION TO RELEASE PEDRO PAN RECORDS AND HOLD HARMLESS, DEFEND AND INDEMNIFY CATHOLIC CHARITIES

I hereby request that Catholic Charities of the Archdiocese of Miami, Inc., its agents, directors and owners (hereinafter jointly "Catholic Charities") release to me the Pedro Pan records (hereinafter "Records") owned and maintained by Catholic Charities pertaining to me and/or _____, whose relation to me is as _____ (parent, grandparent) (hereinafter "Relative"). If this request is for records of a Relative, I represent that I am the next of kin and my Relative is not currently available to execute this authorization. Furthermore, I am not aware of any person who objects to the release of the Records by Catholic Charities to me. I hereby release and agree to hold harmless, defend and indemnify Catholic Charities, Archdiocese of Miami and all their affiliates from and against any claims, demands or litigation, related to the release of Records and the disclosure of the information therein from any persons including my Relative. I have attached a copy of my current driver's license, my birth certificate and my Relative's identification and death certificate (if applicable).

Pedro Pan Participant Information

Requestor Information

Date of birth: _____

Signature: _____

Date of arrival in US: _____

Print name: _____

Name upon arrival: _____

Address: _____

Reason for unavailability to sign: _____

Phone: _____

Email: _____

STATE OF FLORIDA)
) SS:
COUNTY OF _____)

THE FOREGOING INSTRUMENT was acknowledged before me by means of [] physical presence or [] online notarization, this ____ day of _____ 202__ by _____, [] who is personally known to me or [] who has produced a driver's license as identification.

WITNESS my hand and official seal in the County and State last aforesaid this _____ day of _____, 202__.

NOTARY PUBLIC
State of Florida at Large

My Commission Expires: