

Student's Name _____ **Date of Birth** _____
School Student Attends _____ **Grade** _____
Student's Address _____

Parent/Guardian's Name _____
Parent/Guardian Home Phone _____ **Cell Phone** _____
Place of Employment _____ **Phone** _____

Parent/Guardian's Name _____
Place of Employment _____ **Phone** _____
Parent/Guardian Home Phone _____ **Cell Phone** _____

Please circle the Parent/Guardian you would like for us to contact first

Authorization to Release Student-

Unless otherwise authorized by you in writing, no one other than the adults listed on this form may pick your child up from the program. Photo I.D. will be required.

Name _____ **Phone Number** _____
Name _____ **Phone Number** _____
Name _____ **Phone Number** _____

Does your child have any food, medication or environmental allergies? Yes No

If so, please list _____

Does your child have any medical conditions? Yes No

If yes, please describe _____

Please list any medications your child takes _____

Please list any limitations your child may have for participation in the program _____

Emergency Authorization-

Physician Name _____ **Phone Number** _____

Preferred Hospital _____ **Phone Number** _____

I understand that the Neosho Freeman Family YMCA assumes no responsibility for injuries or illnesses which student may sustain as a result of my participation in any activities or use of the facilities for the program. I hereby release and discharge the Neosho Freeman Family YMCA, its agents, servants and employees from any and all claims of injury, illness, death, loss or damage which I may suffer as a result of my participation in these activities. I understand that the YMCA are not responsible for personal property lost, damaged or stolen while participating in the program. I certify that the above information is true to the best of my knowledge. I also give consent for my child to take part in the field trips planned for FunTastic Friday, and to be transported by the Neosho R-5 School District. I also give permission for photos to be taken for publicity and marketing purposes.

Parent/Guardian Signature _____ **Date** _____