



# C.R.A.V.E. AFTER SCHOOL PROGRAM REGISTRATION AND PERMISSION FORM



CHILD'S NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ AGE \_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_  
 HOME TELEPHONE \_\_\_\_\_ WORK TELEPHONE \_\_\_\_\_  
 E-MAIL ADDRESS \_\_\_\_\_ T-SHIRT SIZE \_\_\_\_\_

Special Considerations, Allergies, Medications? \_\_\_\_\_  
 SCHOOL \_\_\_\_\_ GRADE \_\_\_\_\_ TEACHER \_\_\_\_\_

### WHO TO CONTACT IN CASE OF EMERGENCY (OTHER THAN PARENT):

NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
 PHYSICIAN \_\_\_\_\_ PHONE \_\_\_\_\_

### OTHER PERSONS AUTHORIZED TO PICK UP CHILD:

NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
 NAME \_\_\_\_\_ PHONE \_\_\_\_\_

If my child/ward should require minor or major medical treatment during the course of participation in C.R.A.V.E. activities, I give my permission to the Rock Hill Parks, Recreation and Tourism Department or medical staff which they may appoint to carry out the necessary treatment and to take my child/ward to the emergency room of the nearest hospital, if necessary, for the administration of treatment. I understand that I shall be responsible for all costs incurred in any such medical emergency. I, the undersigned parent or guardian, hereby freely and knowingly waive and release the City of Rock Hill, its agents, employees, sponsors, and organizers from any and every liability and responsibility whatsoever for personal injury, property damage, or other loss sustained by the child named above as a result of or arising out of the child's participation in any activity conducted by the Rock Hill Parks, Recreation and Tourism Department. I assume all risks and hazards incidental to the conduct of the activity.

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Parent's/Guardian's Name (Please Print) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

This certifies that my child has permission to participate in the E.S. after school program.

### (STAFF USE ONLY)

Program Site:

Staff Accepting Registration: