

ENFIELD YOUTH SERVICES

Permission to Participate in & be Transported for Youth Council Activities in the 2010-2011 Season

I give my child, _____, permission to participate in Youth Council Activities & be transported by the staff at Enfield Youth Services for the 2010-2011 season. I give permission to the Enfield Youth Services the right to use, reproduce, and/or distribute photographs and/or videotapes of my child for use in any material they may create and/or newsworthy event. I give permission for my youth to participate in program evaluation surveys.

Child's Name: _____ DOB: _____

Address: _____ Phone #: _____

Insurance Carrier: _____ Policy Number: _____

Name on Policy: _____

Mother or Guardian: _____ Phone #: _____

Father or Guardian: _____ Phone #: _____

Emergency person: _____ Relationship: _____ Phone #: _____

Please note *any* allergies your child may have, including *food* allergies:

I give permission for first aid to be administered to my child and, if necessary, transport him/her to a hospital or emergency clinic. Any exceptions to this treatment are listed below:

I, the parent/guardian, of the above named child, hereby give my consent and agree to release, indemnify and hold harmless anyone participating in advisory or official capacity with the Enfield Youth Center as well as the Town of Enfield and its employees, from any claims arising out of injury to the above named child.

Parent/Guardian's Signature

Date