

Contact Information

Guardian Name: _____ Primary Phone: _____ : Secondary Phone: _____

Guardian Name: _____ Primary Phone: _____ : Secondary Phone: _____

Emergency Contact: _____ Phone: _____

Relationship to the child: _____

Parent/Guardian Signature: _____

Custody Info: _____

Emergency Authorization and Pick Up Information



Emergency Authorization:

In the unlikely event that the participant named above is injured or becomes seriously ill while with this program, and I cannot be reached, I authorize the staff to seek and authorize any and all hospitalization, medical, dental, and/or surgical treatment deemed advisable by the circumstances. While every reasonable precaution is taken with this program, it is agreed that the providers and staff and volunteers are released from all liability for injury to the above named participant or for loss or damage to personal property.

Signature of Guardian:

→ _____

Date: _____

Please note that without a guardian signature, your child cannot be admitted into this program



Pick Up Information:

Please check one of the following:

I will allow my child to **walk home** at the end of each program day (for children grades 4 – 7 or family groups only)

OR

I or a designated adult will **pick up** my child at the end of the program. **Please list names and contact numbers for designated adults** who have permission to pick up your child:

Signature of Guardian:

→ _____

Date: _____

Your child will NOT be released to anyone not listed above without prior written or verbal consent

Parental Consent Form - Media Release

Student Name: _____

Grade: _____

In accordance with the Freedom of Information and Protection of Privacy Act, School district #73 (Kamloops-Thompson) requires consent to use personal information for purposes unrelated to the education programs.

It is tradition in our School District to allow school staff, district staff and the media to photograph or videotape individual students and groups of students to commemorate events and to promote various educational, sports and are not required for educational purposes. As such, consent for the release of your child's name, photograph and comments is required. Student's names, photographs and comments may be published in the school newsletter, and on occasions, in the School District Calendar, annual report or in the news media.

Please check one of the following and sign below:

- Yes, I give my consent** for publication of my child's name, photograph, and comments for purposes consistent with the above.
- No, I do not permit** the publication of my child's name, photograph, and comments for the purposes consistent with the above.

Parent/Guardian signature

Date