

ENRICHMENT PARENT AUTHORIZATION FORM SCHOOL YEAR 2023-2024

CHILD LAST NAME _____ CHILD FIRST NAME _____ MIDDLE _____

MEMBER GENDER _____ DATE OF BIRTH ____/____/____ NEWMEMBER RETURNING MEMBER

MEDICAL INFORMATION

Name of Doctor _____ Doctor's Phone # _____

Health Insurance Company _____ Group/Policy # _____

Does your child have any allergies? NO YES; (Specify) _____

Does your child need to take medication while attending the Club? NO YES; MEDICATION(S) List: _____

Is your child current with all immunizations? NO YES

Has your child had any operations, serious injuries, diseases, or problems that may limit their physical activity? NO YES

Is there anything you would like us to know about your child? _____

EMERGENCY CONTACT: (Need Contact Info for people not listed above)

#1 Emergency Contact _____ Authorized to pick up NO YES Relationship _____

Phone Number _____

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Phone Number _____

This health history is correct and the person herein described has permission to engage in all prescribed Boys & Girls Clubs of Greater Conejo Valley (BGC/GCV) activities, except as noted. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the BGC/GCV Director to hospitalize, secure proper treatment for, and to order an examination, x-ray, injection, anesthesia or surgery for my child as named above. If I cannot be reached, I give my permission to the BGC/GCV, and/or its agents, to obtain whatever medical assistance is necessary for my child at my expense. The undersigned hereby agrees to defend, indemnify and hold harmless the BGC/GCV, Conejo Valley Unified School District, and its officers, employees and agents against any and all loss, liability charges, expenses (including attorney fees), and costs of whatsoever character which may arise by reason of participation in any program. (BGC/GCV does not provide accident, medical, liability, workers' compensation insurance, or any other insurance for program participants.) I agree to carefully inspect and satisfy myself that the facilities provided are reasonably safe for their intended use. Once having conducted the inspection, I agree to expressly assume the risk of participation at the premises.

PARENT/GUARDIAN AUTHORIZATION FOR THE BOYS & GIRLS CLUBS OF GREATER CONEJO VALLEY (BGC/GCV)

- I agree to defend, indemnify, and hold harmless the BGC/GCV, Conejo Valley Unified School District, Las Virgenes Unified School District and their officers, employees and agents against any and all loss, liability charges, expense (including attorney fees) and costs of whatsoever character which may arise by reason of participation in any program.
- I give permission for the release and exchange of confidential information from the Conejo Valley Unified School District or Las Virgenes Unified School District in order to provide programs and coordinate services for my child. I understand that my records are protected under federal confidentiality regulation and cannot be disclosed without my written consent unless otherwise provided for in the regulations.
- I understand that the Boys & Girls Club of Greater Conejo Valley is not responsible for any staff outside of club duties.
- I understand the BGC/GCV covid guidelines are subject to change and the BGC/GCV aligns with the CDC Government Agency and the CA State requirements.
- I understand the **BGC/GCV Parent Handbook** is available on our website at www.bgcconejo.org and that it is my responsibility to read this Parent Handbook, become familiar with its contents, and abide by the program requirements and parent responsibilities outlined in it.

Membership Application Waiver section

- In the event of an emergency, I authorize the Club to seek medical attention and transportation for my child if deemed necessary Yes No
- I give permission for my child to be transported to and from program areas, on field trips, and in the case of an emergency Yes No
- I expect my child to stay at the Club until picked up: Yes No

Camper Behavior Waiver

- BGC/GCV reserves the right to dismiss a Camper whose conduct is dangerous, illegal, or in the judgment of the Camp Director, detrimental to the camp and/or to other Campers. Any unused tuition will not be refunded. Yes No

Photo Waiver

- I understand the BGC/GCV retains the right to use photographs, slides or video-taped material of my child taken during activities for promotional purposes and waive all rights for compensation. Yes No
- If your child is feeling sick, you agree to pick them up within 60 minutes of notification. 60-Minute Illness Pickup Waiver Yes No

Print name of Parent/Guardian: _____ Best contact number: (____) _____

Signature Parent/Guardian: _____ Date: _____