

HARTLEY HEALTH FORM

The safety and success of any child is of paramount importance to parents, teachers and the other student participants. Therefore we ask that you please be forthright and thorough when completing this form.

Participant Name _____ Camp Session(s) _____

Participant Address _____

Date of Birth _____ Gender: (please circle) Male Female

Primary Emergency Contact _____ Relationship _____

Daytime Phone _____ Alternate Phone _____

Secondary Emergency Contact _____ Relationship _____

Daytime Phone _____ Alternate Phone _____

Dentist Name _____ Phone _____

Doctor Name _____ Phone _____

Medical History (list)

If there are any special concerns please discuss with instructor signs, symptoms, precautions and treatment.

Allergies (list)

If there are allergies please discuss with instructor signs, symptoms, precautions and treatment.

Special Considerations

Please describe any emotional/behavioral, mobility or other issues you would like the instructor to take into consideration when planning your child's camp experience. If you as a parent, or Hartley Nature Center as the host agency, feel that your child would require a family member or a para-professional to accompany them during camp, it is best if we communicate immediately thereby allowing adequate time to make the necessary arrangements.

Check here if you would like a Hartley staff member to contact you regarding your child's needs. Phone: _____

Emergency Authorization

The purpose of this emergency medical information is to allow HNC to provide medical knowledge and authorization to properly trained medical staff in the event of illness or injury during HNC programs for the individual listed. If the individual is a minor all reasonable attempts will be made to contact parents or guardian. I hereby give consent for medical treatment of my child by professional medical personnel.

Parent/Guardian Signature

Date

Photo Release

Hartley Nature Center uses photographs and video footage of program participants in promotional, scholarly, educational and other HNC materials. We request permission to use your child's likeness for promotion of HNC programs on www.hartleynature.org and in the production of marketing materials. By signing below you provide consent and thereby authorize HNC to include your child's likeness in the materials listed. This is recognized as an in-kind donation. If you have any questions, please call 724-6735.

Parent/Guardian Signature

Date