

SPC PLAYGROUND PROGRAM REGISTRATION

Child's Name _____ Age _____ Birth Date _____

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Child's Name _____ Age _____ Birth Date _____

Address _____ City _____ Zip _____

Email address _____

Home Phone _____ School _____ Grade '11-12 School Year _____

Mother's Name _____ Work Phone _____ Cell Phone _____

Father's Name _____ Work Phone _____ Cell Phone _____

Who has permission to pick up your child from the playground program? (*Other than parents listed above*)

Name _____ Relation _____ Phone _____

Name _____ Relation _____ Phone _____

*** If someone other than the parents or person listed on the registration form will be picking up your child, please notify us in advance.** Anyone not listed on this form must have a "code word" to pick up your child and is required to show a photo ID. "Code Word": _____

EMERGENCY INFORMATION

Preferred Doctor _____ Phone _____

My child has health issues food allergies limitations behavioral issues

If any boxes above are checked, please explain:

*A medication form must be on file if your child has medicine that must be taken during summer playground hours.

PROGRAM LOCATION - Please check your site choice:

Inman Intermediate T.W. Edwards Center Wellford Baptist Church Woodruff Leisure Center

Medical Release

If the parent(s)/guardian and authorized physician named above cannot be reached and immediate treatment is urgent, in the judgment of playground staff, I authorize the treatment of my child by the physician or hospital most easily accessible.

Notations: _____

Permission for Participation in Field Trips

I hereby give approval for my child to participate in field trips as part of the Summer Playground between the dates of June 9 to July 21, 2011, releasing the Spartanburg Parks Commission, all staff, volunteers, and participating/sponsoring agencies of any responsibility in case of injury that may occur under proper supervision.

Permission to be Photographed and Interviewed

I give permission for my child to be photographed and/or interviewed by the Parks staff and the media during activities and to have the pictures/interview used in Commission and local publications.

Rules & Policies

I have received and reviewed the 2011 Summer Playground Program Policies and Procedures.

Parent/Guardian Signature _____ Date _____