

PARENT/GUARDIAN CONSENT MUST BE SUBMITTED FOR EACH CONFERENCE PARTICIPANT 18 YEARS OLD AND UNDER.

MEDICAL RELEASE MUST BE SUBMITTED FOR EACH CONFERENCE PARTICIPANT.

PARENT/ GUARDIAN CONSENT FORM

I, _____ GRANT MY CHILD _____ PERMISSION TO ATTEND KATOYA’S PLAYHOUSE’S (KPI) “A DAY IN THE COUNTRY PROGRAM” I UNDERSTAND MY CHILD WILL BE TRAVELING TO KPI WITH _____ AS MY APPROVED CHAPERONE IN AN AGRICULTURE AND NATURE SETTING AND WILL BE UNDER HIS/HER CARE AT ALL TIMES WHILE AT KPI. I ALSO UNDERSTAND WITHIN ANY AGRICULTURE AND NATURE SETTING MY CHILD MAY COME IN CONTACT WITH INSECTS, ANIMALS DOMESTICATED AND NON-DOMESTICATED AND NATURAL IRRITANTS SUCH AS POLLEN, AND WEEDS.

MEDICAL RELEASE FORM

I, _____, GRANT PERMISSION FOR KPI TO AUTHORIZE MEDICAL TREATMENT AND SERVICES FOR _____ MY CHILD IN THE UNLIKELY EVENT OF AN EMERGENCY. MY CHILD SSN# IS _____

EMERGENCY CONTACT INFORMATION

NAME: _____ PHONE #: _____ CELL: _____
ADDRESS: _____ CITY: _____ STATE: _____
HEATH INSURANCE PLAN: _____ POLICY#: _____

TO ALL CAMP ATTENDEES: PLEASE INFORM KPI OF ANY ALLERGIES YOU/YOUR CHILD MAY HAVE OR ANY MEDICATION YOU/YOUR CHILD MAY BE TAKING. KPI WILL NOT BE RESPONSIBLE FOR THE ADMINISTRATION OF THE MEDICATION. IT SHOULD BE ADMINISTERED BY YOU, THE CHILD OR THE CHAPERONE.