



**UNIFIED EFFORTS, INC. 2019 SUMMER PROGRAM WAIVER/REGISTRATION**

Program Director/Contact Person: Deborah Ramsey - [unifiedefforts@comcast.net](mailto:unifiedefforts@comcast.net)

PROGRAM LOCATION: 2420 Francis Street Balto., MD 21217(Gethsemane Baptist Church)

**MINOR CHILD INFORMATION:**

NAME: \_\_\_\_\_

BIRTH DATE: \_\_\_\_\_ AGE \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ PARENT/GUARDIAN CELL PHONE \_\_\_\_\_

CHILD'S CELL PHONE \_\_\_\_\_ PARENT/GUARDIAN WORK PHONE \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**PARENT 1 NAME:** \_\_\_\_\_

PARENT PERSONAL EMAIL: \_\_\_\_\_

PARENT WORK EMAIL: \_\_\_\_\_

**PARENT 2 NAME:** \_\_\_\_\_

PERSONAL CELL PHONE: \_\_\_\_\_ WORK PHONE NUMBER \_\_\_\_\_

PERSONAL EMAIL: \_\_\_\_\_

WORK EMAIL: \_\_\_\_\_

**GUARDIAN'S NAME:** \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ GUARDIAN'S WORK PHONE NUMBER \_\_\_\_\_

EMAIL: \_\_\_\_\_

**CHILD RELEASE AUTHORIZATION:**

Persons authorized to pick-up child/minor from facility: 1 NAME: RELATIONSHIP PHONE:

NAME: \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL PHONE \_\_\_\_\_

**PERSON(S) UNAUTHORIZED: Persons NOT authorized to pick-up child**

NAME: \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

PHONE: \_\_\_\_\_

**IS YOUR CHILD'S IMMUNIZATION RECORDS UP TO DATE?** YES { } NO { } TETANUS SHOT? \_\_\_\_\_ LIST ALL ALLERGIES, SERIOUS INJURIES, OPERATIONS AND ANY RESTRICTIONS ON PHYSICAL ACTIVITY: IS YOUR CHILD CURRENTLY TAKING ANY MEDICATIONS?

YES { } NO { }

---

---

---

---

**MEDICATION:** LIST ANY CONDITIONS REQUIRING SPECIAL CONSIDERATION, ACCOMMODATIONS: LIST ANY PAST TREATMENT THAT MAY AFFECT PARTICIPATION IN SUMMER PROGRAM:

---

---

---

---

**LIST ANY ACTIVITIES FROM WHICH THE MONOR SHOULD BE EXEMPTED FOR HEALTH/ANY OTHER REASONS:**

---

---

---

---

**UNIFIED EFFORTS, INC. PARTICIPANT ETHNICITY TRACKING TOOL (OPTIONAL):** THIS VOLUNTARY INFORMATION WILL BE USED FOR STATISTICAL PURPOSES IN ORDER TO ENABLE US TO PROVIDE QUALITY SERVICES TO OUR COMMUNITY.

{ } BLACK/AFRICAN AMERICAN { } NATIVE AMERICAN INDIAN { } WHITE/CAUCASIAN { } HISPANIC/LATINO { } ASIAN/PACIFIC ISLANDER { } MULTI-CULTURAL PRIMARY LANGUAGE: { } ENGLISH { } SPANISH ( ) OTHER \_\_\_\_\_ I, the undersigned parent/person having legal custody/guardianship of the above said minor/child, give permission for the minor to participate in all 2019 Unified Efforts, Inc. summer and extended programs throughout the year ending in 2019. The minor is physically able and mentally prepared to participate in all activities as described in the announcement for the program. In consideration, of said minor/child, being permitted to enter the site for this 2019 summer program for use of facilities and/or equipment, or participation in any program, I, on behalf of myself (as parent, guardian), do hereby: 1. Acknowledge that (i) I have read this document, (ii) I have inspected the facilities and equipment, (iii) I accept them as being safe and reasonably suited for the purposes intended and (iv) I voluntarily sign this document, 2. Release Unified Efforts, Inc., its directors, officers, employees, instructors, host site (Gethsemane Baptist Church), UE's personnel, and volunteers (collectively "Releasees") from all liability for any loss or damage to property or injury, whether caused by Releasees or otherwise and while such minor is in or near Unified Efforts, Inc. temporary summer program location: 2520 Francis Street Baltimore, Md. 21217, and inclusive of all off-site locations, field trips, traveling to and fro, outside and/or within the city limits of Baltimore, Maryland, 3. I agree not to sue Releasees for any loss, damage, injury described above and I will indemnify and hold harmless Releasees and each of them from any

loss, liability, damage or cost they may incur due to said minor's presence In, upon or near this location: 2520 Francis Street Baltimore, MD 21217: Whether caused by the negligence of Releasees or otherwise. 4. I assume full responsibility for, and risk of, bodily injury, or property damage due to the negligence of Releasees or otherwise. 5. I do hereby authorize the Unified Efforts, Inc., as agent for the undersigned, to consent with respect to said minor, to any x-ray examination, anesthetic, medical, dental, or surgical diagnosis or treatment, and hospital care which is deemed advisable by and is to be rendered under general or special supervision of, any physician and surgeon licensed under the provisions of the state of Maryland and/or similar thereof, on the medical staff of any hospital, whether such diagnosis or treatment is rendered at the medical facility and/or hospital. I understand that Unified Efforts, Inc. is not responsible for costs incurred for medical care. 6. I have read and agree to the "free" summer program policy in which no fees, cost are expected. 7. I give Unified Efforts, Inc., of Baltimore, Maryland permission to use any picture or likeness of me, or a picture or likeness of my child/minor, in Unified Efforts, Inc. general publicity and campaign materials, including their print publication known as I Belong Magazine.com and all websites controlled by Unified Efforts, Inc. domain names: Unified Efforts, Inc., Unified Efforts.org, Northstar Baltimore, and I Belong Magazine.com.

I intend this document to be as broad and inclusive as is permitted by the laws of the State of Maryland:

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

CHILD'S INFORMATION/NAME \_\_\_\_\_

HEALTH INFORMATION

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SPECIAL DIETARY NEEDS AND/OR ALLERGIES (IF ANY):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3 of 3

**LOCATION FOR UNIFIED EFFORTS, INC.  
2019 SUMMER PROGRAM**

GETHSEMANE BAPTIST CHURCH  
2520 FRANCIS STREET  
BALTIMORE, MD 21217

**CONTACT INFORMATION:** 443-800-0566  
unifiedefforts@comcast.net  
Deborah B. Ramsey - 2019 Facilitator

Registration Deadline: April 2, 2019

**DATES/TIMES FOR 2019 SUMMER PROGRAM**

K-8TH GRADES: JULY 1-19, 2019

9-12 GRADES: JULY 1 - AUGUST 2, 2019

**MONDAY - FRIDAY FOR ALL GRADES**

9AM - 5PM (K-8TH GRADES ONLY)

**HIGH SCHOOL STUDENTS TIMES 10AM-3PM**

**CLOSED JULY 4TH - NATIONAL HOLIDAY**