

PAUL DRUM LIFE EXPERIENCE PROJECT SUMMER 2019

Parent/Guardian Consent Form

Please print

Child's Name: _____

Date of Birth: _____

Parent/Guardian: _____

Phone # (mobile) _____

Phone # (day) _____

Phone # (evening) _____

Email Address: _____

Home Address: _____

Family Doctor: _____

Doctor's Phone # _____

Emergency Contact details (if different from above)

Name: _____

Phone # _____

Relationship to child: _____

The Paul Drum Life Experience Project provides instructions for various activities for children ages 7 – 12. All activities are supervised by adults and proper safety conditions are carefully adhered to.

Acceptance of Child's Participation Guidelines: I understand my child is required to abide by a code of proper behavior, attentiveness and co-operation. I, too, agree to honor the commitment of attendance by respecting the program hours, giving 2 day notification if my child is unable to attend, being respectful of Project educators and volunteers, and supportive of the *Paul Drum Life Experience Project's* mission. I also authorize a *Project* designee to administer immediate or emergency medical treatment. If any unforeseen condition shall arise, calling on the judgment of the physician or the designee, I authorize the medical designee to do what is advisable provided an immediate effort is made to contact me. I will always be available by telephone for the period my child is attending this not for profit educational program.

Signed _____

Date _____

Use of Photographic Images

Throughout the course of the summer there are many occasions when photographs of participating children may be taken for use on our website, our social media and /or promotional materials. These tools allow the community to learn more about our program and allows us to highlight the children's achievements and activities. Photos of large groups, or action photos where children are not identified, may be posted without parental permission.

As pursuant to law, we will not release any personally identifiable information without prior written consent from you as a parent or guardian.

Signing this form will be deemed as consent for the Paul Drum Life Experience Project to allow your child to be included in the above for the 2019 summer season.

Sign: _____

Date: _____