

Pottsgrove Recreation Board
Registration and Emergency Information

Child's Full Name _____ Child's age _____ Birthdate: _____ Last Grade Completed _____
Please indicate shirt size: Youth ____S ____M ____L Adult ____S ____M ____L ____XL ____2XL
(Unmarked will be given Youth Large)

Address _____

Email address _____ Residency Township (circle one) Lower Upper West

Legal Guardian's Names _____ Home phone _____

Cell #1 _____ Cell #2 _____

In case of emergency, parents are the first contact. If parents cannot be reached please contact the person below,

Emergency Contact:

#1 _____ Relationship _____ Phone: _____

#2 _____ Relationship _____ Phone: _____

Medical Information: *All medical information is kept strictly confidential. It is extremely important that we have all necessary medical information concerning your child. This also includes any learning disabilities.*

Family Physician _____ Office Phone: _____

Allergies? YES NO *explain:* _____

Medical Conditions? YES NO *explain:* _____

Medications? YES NO *explain:* _____

Does your child require accommodations due to health, physical, social, cognitive and/or behavioral needs? YES
NO

PRB Medication Policy: The responsibility for administering medications rests with the camper's legal parent or guardian. **No camp staff is permitted to administer medication.** It is important that all medication be taken at home. No medication is to be sent to camp unless it is a prescription drug for preventive reasons or emergency conditions such as seizures, heart conditions, asthma, bee stings or allergy conditions. These preventive or emergency medications may be sent to camp if the rules listed below are followed:

- 1. Note from the doctor stating name of medication, how it is to be given, amount, time and diagnosis of illness. The medication must have the prescription label on the container.**
- 2. Note from the parent or legal guardian giving approval for the medication to be administered by the camper under staff supervision or Site Supervisor or Leader if camper is unable to administer due to an emergency.**

HOLD HARMLESS AGREEMENT

Any participant and/or guardian do hereby agree to the following:

1. To assume all risks and responsibilities of possible damage or injury involved through participation in said activity. I understand I am to furnish my own insurance in case of injury. Understand and request permission to participate in the above activity with the full knowledge that the said activity could result in damage or injury to participant.
2. Agree to indemnify and hold harmless the Pottsgrove Recreation Board, its departments and agents from liability for personal injury or property damage resulting from my participation in said activity.
3. Waive the right to dispute all proper charges once he/she/they have registered and/or participated in the PRB program for which this registration form is received
4. Agree to allow Pottsgrove Recreation Board to use any photos taken at an activity for future publications.
5. By providing my email address, I agree to receive emails from Pottsgrove Recreation Board. Email will not be shared with any other entities.

BEHAVIOR & GUIDANCE POLICY

Children and families are required to follow the same rules as the school district. All rules apply to Summer Playground. Please be sure to review the Summer Playground Falcon Four Guidelines with your child prior to day one. These guidelines will be provided with a calendar of activities prior to the start of playground. By signing and registering your child you are agreeing to all terms and understand a child or children may be terminated due to behavior that is disruptive or which may cause harm to others.

SIGNATURE: _____ **Date** _____

Signature confirms that participant has read and agrees to Pottsgrove Recreation Board Hold Harmless Agreement. (Parent or guardian sign for participant under 18)

ONLINE Registration is now available @ www.pottsgroverec.com or you may still make checks payable to: **Pottsgrove Recreation** and **mail** to: Pottsgrove Recreation 1301 Kauffman Road Pottstown PA 19464

No forms accepted by the school secretary.