

# EMERGENCY INFORMATION & GENERAL RELEASE FORM

**MAKE MULTIPLE COPIES • EACH CHILD • EACH CAMP • EXTENDED CARE • EVERY WEEK**

This form must be completed and signed by a parent/guardian for each participant prior to participating in any of our activities. Submit a completed form to the instructor on the first day of each class and/or camp. For questions, call (510) 494-4300 or email RegeRec@fremont.gov

## PARTICIPANT INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

☐ Male ☐ Female Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Parent's Email Address: \_\_\_\_\_

Custodial Parent/Legal Guardian (if participant is a minor): \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Participant's Medical Insurance Provider (Kaiser, Blue Shield, Blue Cross, Etc.): \_\_\_\_\_

## AUTHORIZATION FOR MINOR CHILD RELEASE AT THE END OF THE DAY

The following people are authorized to pick up my child (they may be called in case of emergency):

Name	Relationship to Child	Cell Phone	Home Phone	Work Phone

☐ My child will arrive and depart camps on his/her own capabilities (walk, bicycle, etc.) INITIAL HERE \_\_\_\_\_ (Check box if yes)

## MEDICAL CONDITIONS

Please indicate any medical or other conditions that might affect your child's participation:

- ☐ Food Allergies \_\_\_\_\_
- ☐ Skin/Sunscreen Allergies \_\_\_\_\_
- ☐ Environmental Allergies \_\_\_\_\_
- ☐ Other \_\_\_\_\_



## OTHER INFORMATION

Understanding a child's background and special needs helps staff to provide the best program experience for all participants including your child. Please list any information you feel is important for us to know (e.g. ADD, ADHD, Autism, learning disabilities, noise sensitivity, etc.):

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## PHOTO RELEASE FOR ALL PARTICIPANTS



Your child could be part of our promotional campaign! The Recreation Services Division may take and use photos and or videos of participants for publicity and marketing purposes. Photos of and videos of our participants are used in the City's Recreation Guide (including the cover), the City website, Facebook, other City media, e-newsletters and any other marketing publications. I hereby grant the City of Fremont permission to use my, or my child's, likeness, name, voice and words in any broadcast, telecast or print media account of this event or activity free of charge.

INITIAL HERE: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_