Student Activity Registration Form

Student

Parent/Guardian Consent



Information	Name	Name Nic			ame	Birt	hdate	M / F	
	Address				_ Email				
	City								
	T-Shirt Size								
(Be sure to read reverse side) Medical Information	Known Dise	l current Imm ases or Co i	nunization Reconditions:	ord needed on	y for camps th	at are 5 or mo	re consecutive	e days.)	
	Difficulties:_ Allergies:								
	Are you tak	ing any me	dications? Y	/ N If yes, w	hat and how o	ften			
	Name of Family Doctor				Phone				
	Medical Ins.	Co. (if none,	please write NC	DNE)		_Policy #			
	Medical Ins.	Phone				_ Gr oup # _			
	Date Date Date I hereby give my consent for TB staff to give my child <u>Tylenol</u> or <u>Ibuprofen</u> as needed. Y / N Initial: PARENT/GUARDIAN AGREEMENT (be sure to read reverse side) I, the parent/guardian of the registrant, a minor, recognize the possibility of physical injury associated with Youth Investment/Timber Bay activities. In consideration for Youth Investment/Timber Bay accepting the registrant for it programs and activities (the "programs"), I hereby release, discharge, and/or otherwise indemnify Youth Investment Timber Bay, their employees and associated personnel, including it's directors and officers of the corporation, it's directors of facilities utilized for the programs, against any claim by or on the behalf of the registrant's participation in the programs and/or being transported to or from the same, which transportation I hereby authorize.								
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Relationship:	Relationship:
(Phone)Text? Y/N	(Phone) Text? Y/N
(Alt. Phone Text? Y/N	(Alt. Phone Text? Y/N
Email	Email
The information on this form was last reviewed and updated by	∕ a Parent/Guardian on:

Review Date:	Initial:						

Student Activity Registration Form



MORE PARENT INFORMATION

Timber Bay/YIF has taken reasonable care to try to make sure that all activities are conducted in a safe and reasonable manner. However, all physical activities involve some degree of risk. As Parents/Guardians, you should use your own common sense in deciding what activities your child should or should not participate in. For example. If your child is unable to swim, it would be wise to restrict your child from certain water activities - without further training. If your child has some type of condition, ailment or physical limitation, which could be made worse by a certain activity, it may be wise to restrict your child from participating in such activity.

If there are any conditions not otherwise disclosed on this form that have a bearing on your child's health, welfare, or participation in physical activities, please notify us about any such conditions.

We hope that all will have a safe and enjoyable experience in the various Timber Bay Activities.

For more information on Timber Bay and its various activities, please visit: www.timberbay.org

EMERGENCY CONTACT INFO

In case of a family emergency, please first call your son or daughter's Timber Bay leader's cell phone.

Timber Bay Staff Contact Info:

If your child is at Timber Bay Camp you may also call:

Timber Bay Camp's Host cell phone: (218) 831-4885 Camp's General Mailbox phone: (320) 532-3200 ext. 2

Please keep this information sheet for your records or in case of an emergency.