

YWCA YOUNG WONDERS CONSENT FORM



CHILD'S NAME (PRINTED): _____

CHILD'S DATE OF BIRTH: _____ **TODAY'S DATE:** _____

PARENT/GUARDIAN NAME (PRINTED): _____

EMERGENCY MEDICAL CARE

In the event of an extreme illness or accident, if a parent/guardian cannot be contacted, I hereby give my consent to YWCA Young Wonders to provide emergency care for my child, including administering first aid/CPR and transport to a clinic, hospital, or doctor. Transportation may be provided in a privately owned car, commercial vehicle, or ambulance/rescue unit.

Name of preferred physician: _____ Office phone: _____

Name of preferred hospital: _____ Office phone: _____

CONSENT TO RELEASE INFORMATION

I hereby give consent to release/exchange any/all information (including, but not limited to, health information) regarding my child between YWCA Young Wonders and _____.

SPECIAL NEEDS INFORMATION /CULTURAL INFORMATION

Please list any medical, allergy, dietary, cultural, religious and/or behavioral situations which could affect your child's adjustment to a group/classroom setting.

MEDICATION

I authorize YWCA to administer topical non-prescription medications (such as sunscreen) to my child as needed. For any prescription medications, I will fill out a separate medication form.

FIELD TRIPS/BUS CONSENT

I hereby give consent for my child to participate in walking or bus field trips. Trips are supervised by authorized personnel of YWCA Young Wonders and will take all possible precautions to ensure their health and safety. I give permission for my child to ride a YWCA or city bus for field trips. I understand I should speak with my child about safety procedures on a bus.

PHOTOGRAPHS/VIDEO

I do do not (check one) consent for my child to appear in photographs and/or video used for YWCA publicity purposes, which could include newsletters, brochures, social media, YWCA website, etc.

PARENT HANDBOOK

I have read the Young Wonders Parent Handbook and agree to adhere to all policies and procedures as stated in the handbook. I will keep the handbook for future reference.

A copy of this signed contract will be kept my child/children's file.

Parent/ Guardian signature: _____ Date: _____