



# Registration Form

(One Per Child)

Child's Name: \_\_\_\_\_

Age (on 08/13/18): \_\_\_\_\_ DOB: \_\_\_\_\_ Grade Completed in June 2018: \_\_\_\_\_

Name of Parent(s): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

Parent or Caregiver's Cell: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

Allergies or Medical Conditions: \_\_\_\_\_

Medications to be administered by camp staff: \_\_\_\_\_

Instructions: \_\_\_\_\_

Home Parish: \_\_\_\_\_

*In Case of Emergency, and parent is unavailable, please contact:*

**Primary:**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

**Alternate:**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

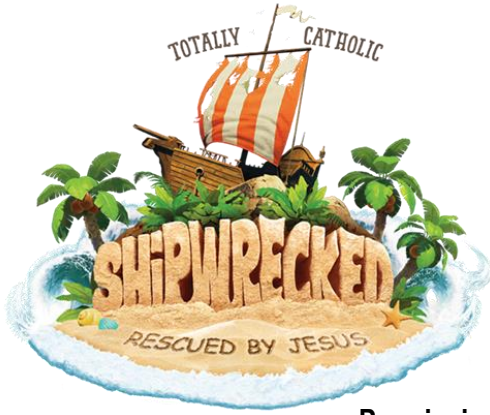
Crew Number:

Crew Leader:

Notes:

**PARISH USE ONLY!**

TOTALLY CATHOLIC



# Medical and Photography Release Form

TOTALLY CATHOLIC



**Permission** for emergency medical transportation of a child via EMT (911)

**I GIVE** St Pius X Parish permission to transport my child, \_\_\_\_\_  
to \_\_\_\_\_ for emergency medical care or to  
\_\_\_\_\_ for emergency dental care, or to the nearest available  
source of assistance.

**Guardian's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

- OR -

**Refusal** of emergency medical transportation of child via EMT (911)

**I DO NOT GIVE** St Pius X Parish permission to transport my child,  
\_\_\_\_\_ for emergency medical or dental care. In the event of an  
illness or injury which requires emergency medical transportation I wish the church to take the  
following actions:

**Guardian's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Permission to **Photograph** your Child

During our five days together, we take pictures of the children for our video slide shows, to post on our website or to use for publicity. We do not associate any personal information/identification with any photograph no matter how it is used. Will you give us permission to photograph your child to use in these ways?

\_\_\_\_\_ **YES**, you do have my permission  
\_\_\_\_\_ **NO**, you do not have my permission

**Guardian's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Crew Number:  
Crew Leader:  
Notes:

**PARISH USE ONLY!**