

# Participant Registration Form 2022-2023 School Year

## Child's Name

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_ Gender: Male \_\_\_ Female \_\_\_  
School Name \_\_\_\_\_ Grade \_\_\_\_\_ Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_ Age (as of 12/31/2022) \_\_\_\_\_  
Street Address \_\_\_\_\_  
Town/City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Child's Home Phone \_\_\_\_\_

## Parent/Guardian - Contact Information

### Parent/Guardian #1

First \_\_\_\_\_ Last \_\_\_\_\_  
Street Address \_\_\_\_\_  
Town/City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Cell phone \_\_\_\_\_ E-mail \_\_\_\_\_

### Parent/Guardian #2

First \_\_\_\_\_ Last \_\_\_\_\_  
Street Address \_\_\_\_\_  
Town/City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Home Phone \_\_\_\_\_ Daytime phone \_\_\_\_\_  
Cell phone \_\_\_\_\_ E-mail \_\_\_\_\_

## Emergency Contact Information – Alternate Pickup/Release

### Emergency Contact #1

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Email \_\_\_\_\_ Relation to child \_\_\_\_\_

### Emergency Contact #2

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Email \_\_\_\_\_ Relation to child \_\_\_\_\_

Please list those people including in addition to parents/guardians who are permitted to pick up your child:

1: \_\_\_\_\_ 2: \_\_\_\_\_ 3: \_\_\_\_\_

## Medical Release Information

### Insurance Information

Policy Number \_\_\_\_\_ Name of Health Insurance Provider \_\_\_\_\_

Primary Physician \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Does your child have any allergies and/or other medical conditions we should know about?

Yes \_\_\_ No \_\_\_ If yes, explain: \_\_\_\_\_

## Transportation Release

I hereby give permission for the transportation of my child for **Zion Lutheran Church Summer Program** activities by bus, car or other means of transportation approved by the Zion Lutheran Church Youth Program. In consideration for transporting my child, I and my child hereby knowingly and freely waive any and all causes of possible action and liability, etc. which I and my child have or acquire against Zion Lutheran Church, its Youth Program, its Congregational Board, employees and volunteers.

I hereby agree that as long as the Zion Lutheran Church Youth Program, its employees and its volunteers act in reasonable and responsible manner, my child and I will not hold them responsible for any consequences that may arise related to that transportation or activity.

Parent's/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Zion Lutheran Church \_\_\_\_\_ has my permission  
\_\_\_\_\_ **does not** have my permission to use my child's photograph for publicity purposes.