Parental Consent/Release Statement

Please circle Y or N for each statement

Υ	N	I give permission to the Youth Services program to receive any school records that may be needed for program services, eligibility and evaluation. All information gathered regarding my child will be held confidential.
Υ	N	I understand that the Youth Services program cannot be held responsible for all occurrences during the after-school or summer portion of the program.
Υ	N	I have received and reviewed the Youth Services Parent Handbook and I understand that my child will be expected to abide by the rules as stated in the Handbook.
Y	N	I understand the consequences for my child's behavior if they do not abide by the rules as stated in the Parent Handbook.
Υ	N	Youth Services will provide food service that consists of breakfast, lunch or snack as appropriate. I will provide food for my child on the days that my child does not participate in Youth Services food service.
Y	N	By signing below, I also authorize my child to be transported in school district, R&A Transportation, Lamers Bus Lines, other school contracted or BHK buses/vehicles.
Υ	N	I give permission for my child to participate in Youth Services field trips. Individual permission slips will be required for every field trip taken.
Y	N	My signature also gives permission to BHK Child Development Board and the school district to secure emergency medical and emergency surgical treatment for the abovenamed minor child while in care.
Y	N	I authorize the application of Off! Brand Skintastic Family insect repellent as needed.
Y	N	I authorize the application of NO-AD or Max Block brand SPF 30 kids sun block as needed.
Υ	N	I also authorize the program to take and use photos, recordings, videos and other media of my child participating in program activities, for education or public relations purposes.
Y	N	I am aware that abuse and neglect of children is against the law and will be reported.
Y	N	I give permission for my child to swim in area pools, lakes and other bodies of water under supervision of a lifeguard and other site staff.
Y	N	I understand that because the program occurs on school grounds, the playgrounds may not be inspected by a separate certified playground safety inspector.

Parent Signature:	Date:	
Staff Signature:	Date:	

Signatures above certify that all information in this registration is complete and accurate.