



****Child will not be able to participate without Emergency Consent Form filled out before program start date.**

EMERGENCY - CONSENT CARD

Name _____ Sex: M ___ F ___ Birth date _____
Surname First Name _____ Day/Month/Year _____

Address _____

Mother's Name _____ Home Tel _____ Work Tel _____ Cell _____

Father's Name _____ Home Tel _____ Work Tel _____ Cell _____

Emergency Contact _____ Tel _____

Child's Doctor _____ Tel _____

Most Recent Tetanus Shot _____ MMR _____

Allergies/Medications _____ Medical Conditions _____

Child's Dentist _____ Tel _____

CONSENT FORM

For my child _____ Medical Number _____

It is our policy to notify a parent when a child is ill or needs medical attention. Occasionally we cannot contact parents and we need to get immediate help for the child. Please sign the consent below so that we can take appropriate action on behalf of your child. We will take this signed consent with us to the emergency centre.

I authorize the staff or person(s) from **John Braithwaite Community Centre** and **North Shore Neighborhood House** to call a physician; take my child to the nearest emergency centre; or summon an ambulance for emergency medical aid, should, in the opinion of the person(s) in attendance, feel such services are required and I cannot be contacted by phone. If such emergency should arise, I shall be notified as soon as possible. I agree that any cost incurred for such services shall be the sole responsibility of myself.

***Signature of Parent/Guardian**

It is the responsibility of the parent to update emergency information. Please advise staff of any changes.

Photograph Consent:

I, _____, the parent or guardian of _____ give permission to staff of the North Vancouver Recreation & Culture Commission and the North Shore Neighbourhood House to take photographs of my child.

I agree to allowing my child's photograph to be used in any publication pertaining to programs offered by the NVRC or NSNH.

Signed this date _____ 2015

***Signature** _____

Turn form over...

Please complete BOTH sides of the consent form.

Please fill out both sides before start of program.

NVRC staff must have this form before the start of the program.

All information on this form is confidential, and the form will be destroyed after your child has completed this program.

Please print clearly.

School _____ **Grade** _____ **Child's Teacher*** _____

Program Name (if known) * _____

I hereby give consent to the staff of the North Vancouver Recreation Commission to take my child/guardian on outings by public transit, chartered bus, and by walking.

Signature _____

Date* _____

Pick-Up Policies: Every parent must fill out this section of the Parental Consent form. We require that all children be picked up on time. If you are more than 5 minutes late picking up your child, we will call you at the number you have provided. Please note we will not release your children to any person(s) for whom we do not have written permission. If an unauthorized person arrives to pick up your child, we will contact you via telephone. Failing that, a designated alternate from the list will be called to pick up your child.

We require parent/guardian to physically sign children out of the program by coming into the school at the end of each day. If you are unable to do this please see below.

If your child will be traveling home alone by bus, or on foot, you must specify this on the form.

• **At the end of each day, my child will return home by: (please check one)**

Taking the bus **Walking home**

Picked up outside the school unsupervised

**In Afterschool Care at the School
(Ridgeway & Westview only)**

Signature _____

My child cannot leave on their own

Date* _____

*** Being picked up by:**

*Please list yourself and two alternates
(friends or family members).*

Yourself:

Relationship to Child:

Phone #:

Name of First Alternate:

Relationship to Child:

Phone #:

Name of Second Alternate:

Relationship to Child:

Phone #: