

EMERGENCY MEDICAL CARE FORM

(To be completed by the parent or guardian)

Participant's Name: _____ Date of Birth: _____

- I authorize Stimulating Minds through Entrepreneurship and Leadership ("Program") to, if necessary, provided basic first aid in accordance to their level of training. Injury assessment and intervention will include the use of topical skin antibiotic as appropriate.
- If my child requires emergency medical care as determined by an appropriately trained employee of the Program, I give my consent to the above Program to obtain the necessary medical care for my child. I agree to pay all of the costs associated with the emergency medical care that my child receives. I understand that every effort will be made to contact me before and after medical care is provided.
- I hereby release the Program from any and all claims which I or my child may have against the program arising from or in connection with the providing of First Aid including but without limitation any claims, demands or causes of action for injuries to my child, including but not limited to injuries resulting from the negligence of the program. This agreement is signed for the purpose of fully and completely releasing, discharging, and indemnifying the program from all liability
- Following emergency medical care, my child may be released to the following people:

Name: _____ Relationship to Child: _____
 Address: _____ Age: _____
 Home Phone: _____ Work Phone: _____

Name: _____ Relationship to Child: _____
 Address: _____ Age: _____
 Home Phone: _____ Work Phone: _____

Name: _____ Relationship to Child: _____
 Address: _____ Age: _____
 Home Phone: _____ Work Phone: _____

5. Health Information:

Allergies: _____ Medication(s) being taken: _____

Student's Doctor (Name and Phone) _____

Medical history or other pertinent facts that should be known: _____

- I understand that this consent will be in effect as of the date of my signing this form and will continue as long as my child is enrolled in the Program.

Parent/Guardian Signature

Date