



PROGRAM REGISTRATION AND RELEASE FORM

Child's Name	Birthdate	Grade
Child wants to be:	Current School	
Allergies or Items of Note:		

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Child wants to be:	Current School	
Allergies or Items of Note:		

Parent/Guardian Information

Full Name	Phone
Email	Phone
Home Address	

Pick up Authorizations

Full Name	Phone	Relationship
Full Name	Phone	Relationship

I give permission to a facilitator or _____ to walk my child(ren) home.

I give permission for my child to participate in all activities as authorized by the Win Room School House. I give permission for the Win Room School House to use pictures and video of my child and/or my child's projects for promotional purposes.

I hereby give permission for my child to be given cardiopulmonary resuscitation (CPR) and first aid treatment by a qualified staff member. In the event I cannot be contacted, I also give permission for my child to be transported by ambulance or aid car to an emergency center for treatment. I further consent to the disclosure of health information and to the medical, surgical and hospital care treatment and procedures (including, but not limited to, administration of necessary anesthetics, tests, x-ray examinations, transfusions, injections, drugs) to be performed for my child by a licensed physician or hospital selected by on-site staff when deemed immediately necessary or advisable by the physician to safeguard my child's health.

Recognizing that the Win Room School House will do its best to ensure a safe experience, I understand that accidents may occur both from my child's participation in program activities and from transportation to and from the program. I agree to assume these risks. By signing below, I release the Win Room School House, Central Share, Tougo Coffee, and its employees, volunteers, independent contractors, directors, mentors and agents from all liability based on any damage, loss or injury whether it is the result of ordinary negligence or otherwise, caused to my child or to me from participation in Win Room School House programs.

The applicant hereby gives permission for the Win Room School House (local, national and international) to use, without limitation or obligation, photographs or other media that may include the members' image or voice to promote or interpret Win Room School House programs.

I have read and understand the above and have completed this form to the best of my ability.

Signature of parent or legal guardian:	Date:
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