

# Kid's Night Out Registration Fall 2015

## Camper Info:

Camper Name: \_\_\_\_\_ Gender: \_\_\_\_\_ DOB: \_\_\_/\_\_\_/\_\_\_  
(Last) (First)

Nickname: \_\_\_\_\_ Current Grade: \_\_\_\_\_

## Parent Info:

Parent/ Guardian Name(s): \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Additional Phone #'s: \_\_\_\_\_ Medical Insurance Co \_\_\_\_\_ Policy #: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relation to Camper: \_\_\_\_\_ Phone #: \_\_\_\_\_

**I hereby allow these people listed to pick up my son or daughter (other than parent name listed above):**

\_\_\_\_\_

## MUST HAVE PICTURE ID ON HAND BEFORE SON/DAUGHTER WILL BE CHECKED OUT

**\*\*Please park in the D7 lot off Driver Drive and escort your child to the MAC during drop off or we also offer a drop-off system at the end of Driver Drive at the UREC Loading Dock. This is located off of University Boulevard. As a reminder dinner (pizza) will be provided!**

**Enrollment Info: Each KNO date costs \$20 Session includes the Climbing Wall, Swimming, Arts & Crafts, Games/Physical Activity and Pizza party ☺** Method of Payment (please check one): Online Credit Card \_\_\_\_\_ Check \_\_\_\_\_ (payable to: James Madison University) JMU Flex \_\_\_\_\_ (we do not accept cash, thank you for your understanding)

\*\*\*You may send in form and/or payment to UREC MSC 3901, James Madison University, Harrisonburg, VA 22807 Attn: MC Sowder Or email form to [sowdermc@jmu.edu](mailto:sowdermc@jmu.edu) → Drop-in registration the day of the event is allowed but no cash at all please.

Please circle the Spring KNO Date(s) in which you will attend:

9/26/15 KNO Date      11/6/15 KNO Date      12/4/15 KNO Date

## PARENT CONSENT AND HEALTH HISTORY

### Consent to Medical Treatment/ Assumption of Risk

In the event of injury or illness of my son/daughter/ward \_\_\_\_\_ date of birth: \_\_\_\_\_ I hereby authorize James Madison University, or representatives thereof, to admit the above named individual to a facility for emergency medical treatment as may be deemed necessary to his or her health welfare. The undersigned hereby consents to whatever medical treatment is deemed necessary. The undersigned on his or her behalf of the individual named above, their heirs, assigns and personal representatives, hereby release James Madison University, its trustees, officers, faculty, and employees from any and all claims arising out of the admission to, or treatment administered by, such facility. The undersigned hereby acknowledges and agrees that participation in the camp and related activities carries with it an inherent risk of physical injury. In consideration of the registrant's participation in the camp, the undersigned, on behalf of the registrant, hereby assumes all such risks of physical injury and does hereby release and forever discharge James Madison University, its trustees, employees and agents from any and all liability, claim or loss arising from bodily injuries or damage to personal property resulting from the registrant's involvement and participation in the camp.

## PARTICIPANTS HEALTH STATEMENT

*Please complete the following as thoroughly as possible. The information will be used only by the program leaders and any emergency medical personnel. All material is confidential.*

1. Please list any disabilities or conditions (heart conditions, diabetes, seizures, etc) that the camper has that might affect his or her participation in any camp activity. Please include any recent (last six months), major illnesses, operations, or broken bones. \_\_\_\_\_

2. Please list any allergies that your camper might have, including bee stings, **food**, or medication/drugs: \_\_\_\_\_

3. Last date of immunization (tetanus, booster, etc)? \_\_\_\_\_

4. Medications being taken \_\_\_\_\_ **(JMU staff members and volunteers will not distribute medication)**

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
(Date)

The above signed acknowledges that he/she is the legal guardian of the camp registrant and has read and agrees with all of the information provided on this registration form. Also, that the information provided above is filled out to the best of his/her knowledge.