

Fraser Valley Metropolitan Recreation District

Release Waiver 2017/2018

Licensed School-Age Programs

Participant Name: _____	Date of Enrollment: _____	Date of Birth: ___/___/___
Mailing Address: _____	City: _____	State: _____ Zip: _____
Parent/Guardian 1/Participant 1: _____	H#: _____	W#: _____ C# _____
Employer: _____	Employer Address: _____	
Parent/Guardian 2/Participant 2: _____	H#: _____	W#: _____ C# _____
Employer: _____	Employer Address: _____	
E-mail: _____	Grade (or entering Grade): K 1st 2nd 3rd 4th 5th 6th 7th 8th	

I, the undersigned, understand the dangers and risks involved with participation or being a spectator with the General Recreation Programs and the possible injuries that can occur. In consideration of being permitted by the Fraser Valley Metropolitan Recreation District to either participate in or to be a spectator with the General Recreation Programs, I hereby assume all risks and release, indemnify, waive, discharge, and covenant not to sue (both myself and minor children of mine attending such activities and for my heirs, personal representatives and assigns), the Fraser Valley Metropolitan Recreation District, its Board of Directors, all of their employees, officers, committee representatives and assistants from all liability to me of any loss, damage or personal injury or any such claims, on my minor children present at such activities, whether or not caused totally or partially, by the negligence of the Fraser Valley Metropolitan Recreation District or such persons while the undersigned is participating in such activities or is a spectator at such activities. The Undersigned hereby assumes full responsibility for any risk or bodily injury of property damage caused by such described participation or as a spectator. I further release all officials, supervisors, employees, and other agency personnel from any claim whatsoever, including negligence, on account of first aid treatment, or services render to me or my minor children during or after such described participation or while acting as a spectator. This general release shall apply until revoked or canceled in writing by the undersigned.

I THE UNDERSIGNED, UNDERSTAND THIS RELEASE WILL BE ON FILE FOR THE YEAR 2017-2018 TO COVER ANY PARTICIPATION OR BEING A SPECTATOR WITH THE GENERAL RECREATION DEPARTMENT PROGRAMS FOR THE YEAR 2017-2018.

Date _____ Signature _____
(Participant or Parent/Guardian)

AUTHORIZATION FOR EMERGENCY MEDICAL CARE: I, _____ Hereby give permission to the Fraser Valley Metropolitan Recreation District Administration or staff to contact a doctor for medical or surgical care for treatment or care for myself or my child, _____. Should an emergency arise, the expense of emergency medical treatment or care will be accepted and paid by me.

Date _____ Signature _____
(Participant or Parent/Guardian)

***EMERGENCY CONTACTS* Person(s) to be notified in case of emergency situation when parent/guardians are not available:**

Name: _____	Relationship: _____	City/State: _____	H#: _____	C#: _____
Name: _____	Relationship: _____	City/State: _____	H#: _____	C#: _____
Name: _____	Relationship: _____	City/State: _____	H#: _____	C#: _____

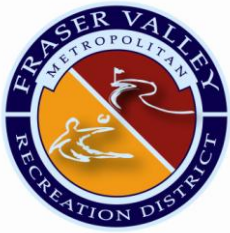
EMERGENCY TRANSPORT In case of serious injury or illness when neither parent / guardian nor emergency contact can be reached, will you allow you or your child to be transported to the emergency clinic by an employee of the FVMRD. **YES** **NO**

FIELD TRIPS The Fraser Valley Metropolitan Recreation District's General Recreation Department has my permission to take my child on field trips away from the Fraser Elementary School or Grand Park Community Rec Center. **YES** **NO**

RELEASE AUTHORIZATION Person(s) other than parent, child may be released to
Name/Address/Phone (if not listed above): _____

DESTINATION RELEASE (If a child will be leaving WITHOUT parent/guardian or other)
My child _____, has my permission to be released on their own to a destination of: _____. I, the undersigned, understand the dangers and risks involved with this release and the possible ramification that could occur. In consideration of permitting Fraser Valley Metropolitan Recreation District in releasing my children, I hereby assume all risks and release, waive, discharge and covenant not to sue (both for myself and minor child/children). The Fraser Valley Metropolitan Recreation District, its Board of Director, all of their employees, officers, committee of representatives and assistants from all liability to me of any loss, damage, or personal injury or any such including death. This release shall apply until revoked or canceled in writing by the undersigned.

Date _____ Signature _____
(Participant or Parent/Guardian)



Fraser Valley Metropolitan Recreation District Health Record 2016/2017 Licensed School-Age Programs

Children who enroll in the Fraser Valley Metropolitan Recreation District (FVMRD) Programs must completely fill out this form, sign it and date it prior to admission to the program. This is a statement of your child's current health status which indicates your child's abilities and/or limitations to participate in regularly scheduled programs of play in a group of children. ****A copy of your child's immunization record is MANDATORY prior to your child's participation.***

Name of participant: _____

Specific instructions for reaching parents: _____

Past Illnesses - Check only those that your child HAS had and give approximate dates:

Chicken Pox _____ Rubeola _____ Rubella _____ Rheumatic Fever _____
 Asthma _____ Hay Fever _____ Diabetes _____ Mumps _____ Epilepsy _____
 Whooping Cough _____ Poliomyelitis _____ **Other** _____

Tuberculin Test _____ (date) Results _____

Chest X-ray _____ (date) Results _____

Vision (right eye) _____ (left eye) _____ **Hearing** _____

Surgery / Accidents / Illnesses / Chronic or Handicap problems? _____

Describe any physical condition requiring SPECIAL ATTENTION by the staff: _____

MEDICATION(s): _____

Prescription AND Non-Prescription Medications require a separate Health Care Form to be completed.

ALLERGY(s) that staff should be aware of (including drug allergies): _____

If your child has a severe allergy, epipen, inhaler, nebulizer, or needs to take meds while on field trip - the corresponding health care form MUST be completed and accompany this form.

Does staff have permission to apply basic **First Aid** (ice, bandage, soap & water and Peroxide)? **YES** **NO**

Date of last physicians' examination: _____

Physician: _____ **Address:** _____ **Phone:** _____

Dentist: _____ **Address:** _____ **Phone:** _____

Emergency treatment clinic: _____ **Address:** _____ **Phone:** _____

Health Insurance Co.: _____ **Policy #:** _____

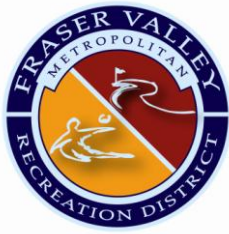
This child is physically or emotionally able to participate in the FVMRD Programs. **YES** **NO**

Comments _____

I acknowledge that this form is required by the Colorado Department of Social Services.

Signature of Parent/Guardian

Date



**Fraser Valley Metropolitan Recreation District
Sunscreen & Medications Release Form**
Licensed School-Age Programs 2017-2018

Name of Participant: _____

I understand that, by law, FVMRD staff is not permitted to administer medication of any variety to my child, nor may my child bring medication from home and self administer. If my child requires any medication (prescription or non-prescription) to be administered at FVMRD programs I acknowledge that I must complete a Health Care Plan with written authorization from a health care provider and communicate with FVMRD staff. Please contact the FVMRD Camp Coordinator or Director to complete a Health Care Plan.

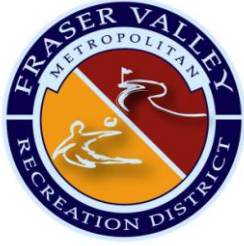
Signature

Date

I understand that, by law, the Fraser Valley Metropolitan Recreation District's Summer Day Camp staff is required to administer sunscreen to my child. I agree to put it on in the morning prior to attending FVMRD programs and acknowledge that it will be applied throughout the day by my child or FVMRD staff. I hereby give my permission for the FVMRD Summer Camp Staff to provide/apply/assist in applying SPF 30 and/or SPF 50 to my child.

Signature

Date



Fraser Valley Metropolitan Recreation District Participant Conduct & Guidance Policy Licensed School-Age Programs

Fraser Valley Metropolitan Recreation District (FVMRD) has developed the following policy in regards to participant behavior and guidance.

The FVMRD may immediately suspend a: facility use / camp / field trip / afterschool program / specialty class participant for engaging in physical confrontations within any of the following areas: a recreation district, school building, school grounds, vehicles, or during any recreation district sponsored programs or activities. Prior notification to parents will not be required.

The FVMRD may suspend (upon written notification) a youth participant from a camp / field trip/ after school program / specialty class when the participant engages in one or more of the following behaviors. A third written warning will result in a participant being suspended from camp / field trip/ after school program/ or specialty class for the remainder of the session.

- **Using offensive language**
- **Being disrespectful to camp staff / supervisors**
- **Being disrespectful to any recreation district staff**
- **Being disrespectful to facility or facility staff on outings**
- **Being disrespectful to school staff**
- **Being disrespectful to peers**
- **Being destructive to school or recreation properties**
- **Not following program rules and / or directions**

A Behavior Report (1st written warning) and Behavior Contract (2nd written warning) will be completed by the program supervisor and the participant if issues are to arise. These forms will be sent home for parents to review and sign.

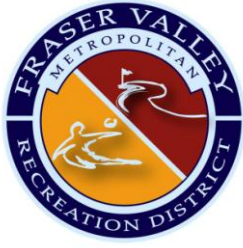
The FVMRD requires the signature of the participant and parent on the above policy. Please return to the FVMRD Youth Program Coordinator or Supervisor.

Participant's Signature

Date

Parent/Guardian's Signature

Date



**Fraser Valley Metropolitan Recreation District
Media & Technology Release Form
Licensed School-Age Programs 2017-2018**

Name of Participant: _____

Computer/Technology Usage Policy:

I have discussed with my child safe and responsible technology usage. My child has agreed to abide by the district technology usage policy.

_____ **Yes**, my child can use the computers on the FVMRD, FVE, and Fraser Valley Library's network.

_____ **No**, my child cannot use the computers on the FVMRD, FVE, and Fraser Valley Library's network.

Media Permission:

I grant permission for my child to watch videos that are deemed appropriate (G or PG movies).

_____ **Yes**, my child may watch videos.

_____ **No**, my child may not watch videos.

Media Waiver & Release:

I consent to my child being photographed, interviewed and/or videotaped by representatives of FVMRD media outlets (newspaper, T.V. stations, etc.). Any information or images obtained from those activities may be reproduced by the FVMRD and/or the public media for use in advertising, publicity or educational activities, including but not limited to district and school publications, social media, videos, print and television news. I hereby waive any claims I may have, and release the FVMRD and its employees from liability of claims arising out of such activities.

_____ **Yes**, my child may be photographed, interviewed or videotaped for media use.

_____ **No**, my child may not be photographed, interviewed or videotaped for media use.

FVMRD Website:

I consent to my student's first name only and/or picture appearing on the district's website and/or FVMRD social media sites.

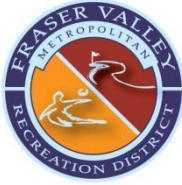
_____ **Yes**, I do

_____ **No**, I do not

Verification:

I verify that the information provided on this form is accurate and current, and that I am the legal parent/guardian of the student.

X _____
SIGNATURE of Parent/Guardian **PRINT Name of Parent** **Date**



Fraser Valley Metropolitan Recreation District Bike/Skate Safety Permission Slip

PLEASE FILL OUT THIS FORM & RETURN TO FVMRD if your child plans to bring a bike to camp.

All children will have the opportunity to participate in biking as an activity at summer day camp. FVMRD has established that 5th-8th grade students may ride bicycles/skateboards/scooters to camp. Both Fraser Valley Elementary School and The FVMRD Program Building provide bike racks.

Although we try to minimize the risk, we would like parents to be aware that neither the school nor FVMRD can take the responsibility for lost, stolen, or vandalized bicycles, either while on school property or while enroute to and from school/camp. However, if any vandalism occurs to bicycles while on school property, please report it to FVMRD Staff immediately. We wish to assist you in any way we can to find the person responsible for the vandalism. Please impress upon your child that, if he or she rides a bike or skateboard to camp, he/she **must wear a helmet**. Bikes/skateboards are considered a means of transportation to and from school/camp and are only allowed to be ridden for means of transportation unless camp activities state otherwise. Safety dictates that bikes not be used as toys in a camp setting.

We ask that parents please thoughtfully consider the safety issues of allowing their child to ride a bike/skateboard/scooter to camp.

Any parents wishing to have his/her child ride a bike to school, daily or occasionally, need to note this in the destination release on the FVMRD Release Waiver.

Camper's Name: _____

Description of Bike: _____

Camper's Grade (circle one): 1st 2nd 3rd 4th 5th 6th 7th 8th

Address _____ City _____ Zip _____

Phone Number _____

I give my permission for the above named camper to ride his/her bike at camp with the understanding that Fraser Valley Elementary/Fraser Valley Metropolitan Recreation District cannot be responsible for theft, vandalism, or any injury the child may incur en route to or from camp. **My child also understands that he/she is to wear a helmet**, and the bike needs to be locked at the bike rack during the day.

(Signature of parent or guardian)

(Today's Date)

