



SUNRISE DAYCAMP INFORMATION & PERMISSION SHEET

Child's name: _____ Age: _____

Address: _____

City: _____ Zip Code: _____ Home Phone: (____) _____

Mother's name: _____ Work Phone: (____) _____

Father's name: _____ Work Phone: (____) _____

Emergency contact: _____ Emer. Phone: (____) _____

People allowed to pick up child: _____

School: _____

Where did you hear about our program? _____

Is there anything we should know about your child or your situation? (medications, etc.):

I, _____, hereby give permission for my child, _____
(Parent's name) (Child's name)

to go on trips and outings with the Boys and Girls Club of Greater San Diego. In the event that I cannot be reached in an emergency, I give permission for the physician selected by the Club Director, or his/her designated staff member, to secure proper treatment for, and to order injection, anesthesia, or surgery for my child's as named above.

Furthermore, I have received, read, understand, and agree to all of the conditions set forth in the Parent Information Sheet.

(Signature of Parent or Guardian)

(Date)



GUIDELINES TO LIVE BY IN THE SUNRISE DAYCAMP PROGRAM

PARENTS AND CLUB MEMEBRS: PLEASE READ OVER THE FOLLOWING GUIDELINES AND SIGN BELOW

1. I promise to treat others and their property with respect.
2. I promise to respect and obey all leaders
3. I promise to take care of all equipments and supplies. I understand that I can't have much fun with broken equipment.
4. I will leave valuable items at home. I understand that valuable things such as expensive watches and toys are safer at home.
5. I promise to be responsible for my things – I will not leave items lying around the club. I understand that things can easily disappear if they are left on the floor.
6. I promise to learn and obey all rules in each area of the club. For example, I know that I may run in the gym, but nor in the gamesroom or in the homework area.

I have read the above guidelines, I understand them, and I agree to live by them.

Signed _____
Member Signature Parent Signature

Date: _____