

Emergency Medical Information and Permission Form
Revere High School Tennis Youth Clinic
at Revere High School Courts

Child's Name _____

Age: _____ (Please circle) Male Female

Address: _____

City: _____ Zip: _____

Home Phone: _____ Cell: _____

Email _____

Emergency Contact

Name & Number: _____

Relationship: _____

In case of Inclement weather: 330-730-2528

Medical Information:

Does the child have insurance through the parent's employer?

Please circle: Yes No

If yes, name of the insurance company: _____

Medications: _____

Please list any special needs, medical problems or disabilities that make it advisable for your child to follow a limited program of physical activity: (list recent surgery, illness, broken bones, injuries, **allergies**, or any physical conditions)

Permission:

This portion must be completed, signed and returned in order for your child to participate.

1. Parent Authorization. The medical history is correct to the best of my knowledge, and the child herein described, has my permission to engage in all activities, unless otherwise noted to me. In the event I cannot be reached, I give permission to contact the Bath Emergency medical technician to make the best decision for medical needs of my child based on information given.

Preferred Hospital: _____

Hospital Phone: _____

Preferred Physician: _____

Physician Phone: _____

2. Medical Waiver. To the best of my knowledge, my child is in good health and can participate in the activities of the Revere High School Tennis Clinic.
3. Indemnification by Parent or guardian . The undersigned parent/guardian of the above named child agrees not to hold the Revere Local Schools, its employees, or student participants against any and all liability, claims, judgments, or demands for damages arising as a result of injuries sustained while attending or participating the Revere High School Tennis Clinic for Kids.
4. Dismissal. The staff for the Revere High School Tennis Clinic reserves the right to dismiss any participant whose behavior is disruptive. Disruptive behavior can be described as conduct that prevents the execution of any activity or instruction, or endangers program participants and /or staff.

On occasion, the Revere High School Tennis team or coaches may take photographs of participants in our program. Please be aware that these photos are for the use of the Revere Schools only and may be used in future activity guides, or brochures, news articles, or fliers.

I certify that, as parent/guardian of the above named student, together we have reviewed all regulations in the above itemized paragraphs pertaining to the Revere High School Tennis Clinic and understand failure to abide by these regulations will result in immediate dismissal from the program without a refund.

Signature of Parent/Guardian

Date