

Parent/ Legal Guardian Consent Form

Title of Program and Date (i.e., Baseball Skills Camp 2012) \_\_\_\_\_

Participant's Full Legal Name (print) \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

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Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex \_\_\_\_\_ School Year (upcoming) \_\_\_\_\_

List the names and telephone numbers of two individuals to contact in the event of an emergency. Include home, work, and cell phone numbers.

1st Person \_\_\_\_\_

Home \_\_\_\_\_ Work \_\_\_\_\_  
Cell \_\_\_\_\_

2nd Person \_\_\_\_\_

Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

List any medical alerts and/or prescription medications the participant is currently taking. Use the back of this sheet if more space is needed.

Medication \_\_\_\_\_  
Dosage \_\_\_\_\_

Medication \_\_\_\_\_  
Dosage \_\_\_\_\_

Medication \_\_\_\_\_  
Dosage \_\_\_\_\_

Check here if further medications listed on back of this sheet.

I hereby give my permission for (participant's name) \_\_\_\_\_ to participate in the Case Western Reserve (CWRU) \_\_\_\_\_. I further give my permission for an emergency service worker, physician, hospital, athletic trainer, or any other qualified personnel to provide necessary healthcare in the case of an injury and/or emergency. I agree to hold CWRU and its officers, employees, and faculty harmless for any and all injuries or damages sustained by the participant in the program. I release, waive, and forever discharge CWRU and all of its officers, employees, and faculty acting officially or otherwise, from all claims demands, actions, or causes of action, on account of any injury, death or property damage which may occur at any time or for any cause during participation in a CWRU program or event.

Parent or Guardian\* (Print) \_\_\_\_\_

Parent or Guardian\* (Sign) \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

\*Only the participant's parent or a Legal Guardian may sign this document. A Legal Guardian is one that has been assigned guardianship by a court of law and that guardianship is current and active.