

TRSTY Emergency Contacts and Release Form 2011-2012

(7th through 12th Graders – Please mail this back to TRS with a check for \$36)

Student Name: _____ Date of birth: _____ Sex: ___

Student Email: _____ Grade (new year): ___

Secular School: _____

Student Name: _____ Date of birth: _____ Sex: ___

Student Email: _____ Grade (new year): ___

Secular School: _____

Home address: _____

Child resides with ___ Mother ___ Father ___ Both ___ Other: (attach full contact information on separate sheet)

Parent 1

Parent 2

Name: _____ Name: _____

Home: _____ Home: _____

Work: _____ Work: _____

Cell: _____ Cell: _____

Email: _____ Email: _____

Emergency Contact Information

Should my child become ill and a parent cannot be reached, please notify either of the following people:

Name: _____ Relationship: _____ Phone: _____

Authorized to pick up: (Y/N)

Name: _____ Relationship: _____ Phone: _____

Authorized to pick up: (Y/N)

In case of emergency or natural disaster and I am unable to reach the Temple to pick up my child, with the appropriate designation (Y/N) above, I designate the above person to pick up my child.

Medical Information

PhysicianName: _____

Insurance Company: _____

Plan/Group#: _____

Policy #: _____

Allergies/medical conditions: _____

The Parent(s)/guardian authorizes Temple Rodef Shalom to obtain immediate medical care and consents to the hospitalization of, the performance of necessary medical tests upon, the use of surgery on, and/or the administration of drugs to, his/her child or ward if an emergency occurs when he/she cannot be located immediately. It is also understood that this agreement covers only those situations which are true emergencies and only when he/she cannot be reached. Otherwise he/she expects to be notified immediately. By signing here I also give permission for pictures of my child (including, without limitation, photographic, digital and video images) taken during programs or at any time during school or youth activities, to be used in Temple Rodef Shalom publications or bulletin boards.

Signature: _____ Date: _____