

UJA-JCC GREENWICH YOUTH EMERGENCY RECORD 2019-2020

Child's Name _____ Birth Date ___/___/___ Grade (Sept. 2019) _____

Address _____ City _____ State _____ Zip Code _____

Parent/Guardian Name _____

Home Phone _____ Business Phone _____

Cell Phone _____ E-Mail _____

Parent/Guardian Name _____

Home Phone _____ Business Phone _____

Cell Phone _____ E-Mail _____

Physician _____ Phone _____

Dentist _____ Phone _____

Orthodontist _____ Phone _____

Allergies _____

Medications taken regularly _____

Health Insurance Carrier & Member # _____

In consideration of services provided to my child, I release JCC Greenwich, Inc. and UJA/Federation of Greenwich, Inc. (individually and collectively "UJA-JCC"), and their respective officers, directors, employees and volunteers, from any and all claims that may arise as a result of any injury, loss or damages incurred by my child while participating in a UJA-JCC program. In the event of any medical emergency or accident, UJA-JCC may transport my child by ambulance or private automobile for medical, dental or surgical treatment. I hereby authorize a licensed physician, dentist, other emergency medical personnel or hospital to provide such treatment. I agree to pay any costs associated with such treatment.

I grant UJA-JCC and its representatives and employees the right to take photographs of me and my property in connection with events that I attend and participate. I authorize JCC and UJA, its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that UJA-JCC may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.

Signature _____ Date _____



Emergency Contacts - The following persons are authorized to pick up my child from UJA-JCC events. Please remember to notify these people that they may be contacted by the UJA-JCC office.

NAME	RELATIONSHIP	PHONE NUMBERS (HOME, CELL, ETC.)
1.		
2.		
3.		