**NON-CAMPER**

**WEDNESDAY FIELD TRIP PERMISSION SLIP**

**Club Member Information**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**First Name**  **Last Name** **Age**  **Grade (2017-2018)**

My child has permission to use sunscreen/bug spray \_\_\_\_YES \_\_\_NO

Health condition(s) regarding my child that staff members need to be aware are: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For emergency information, please list medications that your child is currently taking, dosage and how many times per day.

Medication\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dosage\_\_\_\_\_\_\_\_\_\_\_ Times per day \_\_\_\_\_\_\_

Medication\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dosage\_\_\_\_\_\_\_\_\_\_\_ Times per day \_\_\_\_\_\_\_

Medication\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dosage\_\_\_\_\_\_\_\_\_\_\_ Times per day \_\_\_\_\_\_\_

I give my son/daughter permission to participate in all activities inside and outside of the Boys & Girls Club of Sparta between June 12th and August 25th, 2017. This will include daily activities as well as field trips. It is understood that my child must abide by any directions given by any and all of the Club staff members. A warning system will be enforced and members with severe behavioral/discipline problems will either get picked up from the field trip location by a parent, lose future field trip privileges, or other consequences as deemed appropriate by an administrative staff member of the Club.

I release the Boys & Girls Club of Sparta and/or any of its contractors of all liability for injuries or losses that may arise from my child participating in any activities. I also understand that I am responsible for all damages or losses that may occur due to the actions of my child. I understand the Boys & Girls Club of Sparta will make every effort to ensure my child will have a safe, fun, and educational experience.

In the event of an emergency, I hereby give permission to the physician selected by the Club staff to hospitalize, secure proper treatment and to order injection, anesthesia, or surgery for my child unless otherwise noted.

* I understand my child must be a currently registered Club member to participate in any and all programming.
* I understand the Summer Activity & T-shirt fee must be paid prior to participation in any and all programming.
* Payment in full must be made by the Friday before field trip attending.
* I have read and agreed to all statements and terms of this permission form and the conditions set forth herein.
* I have received a copy of the 2017 parent handbook. I am responsible for knowing the contents.
* I have received a copy of the Parent Summer Handbook/Packet and aware of its contents.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian First Name Parent/Guardian Last Name Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent /Guardian Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Relationship to Child Phone

NON-CAMPER FIELD TRIP FORM

SUMMER CAMPER PAYMENT RECORD

**~~STAFF USE ONLY~~**

Member’s Name Expiration date of current membership \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is a Membership Needed? Yes No If yes, was a membership purchased? Yes No Date Purchased

Activity fee & T-Shirt Form CompletedDate Paid \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Staff Initials \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Date of Trip** | **Location** | **Amount Due** | **Amount Paid** | **Date** **Paid** | **Staff** **Initials** |
| Wednesday, June 14th | High Rollers~La Crosse Loggers | $30 |  |  |  |
| Friday, June 17 | Noah’s Ark (6th grade and up) | $35 |  |  |  |
| Wednesday, June 21 | Grow La Crosse~La Crescent Pool  | $30 |  |  |  |
| Wednesday, June 28 | Mt. Olympus | $30 |  |  |  |
| Wednesday, July 5 | Timber Falls~Devils Lake | $30 |  |  |  |
| Wednesday, July 12 | Action City~ Paul Bunyan Logging Camp | $30 |  |  |  |
| Wednesday, July 19 | Jellystone | $30 |  |  |  |
| Wednesday, July 26 | Organic Valley Farm Tour~ Oakdale Roller Rink | $30 |  |  |  |
| Wednesday, August 2 | Kalahari | $30 |  |  |  |
| Wednesday, August 9 | Madison Zoo | $30 |  |  |  |
| Wednesday, August 16 | Action City Trampoline Park~ Chaos Swim | $30 |  |  |  |
| Wednesday, August 23 | Timbavati Wildlife Park& Jet Boat Ride | $30 |  |  |  |