

# Child Information

## Form 2023

### General Information:

Name of Child: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Emergency/Work: \_\_\_\_\_

Email: \_\_\_\_\_

### Pick-Up Authorization:

Listed below should be people that you have given permission to pick up your child. If anyone other than the people listed below should pick up your child, you will need to call the Children's Discovery Museum at (309) 433-3444, and let us know the name of that person. At the time of sign-out, the staff will ask for a photo ID to match up with the name. Please advise anyone picking up your child of the above procedures! Thank you for your cooperation in this matter!

Mother: \_\_\_\_\_ Phone: \_\_\_\_\_

Father: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### Photographic/Video Release:

Photos and video are periodically taken of participants in a class, during a special event or at Town of Normal events, parks and facilities. Please be aware that these photos and video footage are for use by the Town of Normal only and may be used in the Town's publications and website. All photos are the property of the Town of Normal. I hereby consent to any publicity, including the use of my child's name and likeness in connection with my child's participation.

Date: \_\_\_\_\_ Signature of parent/guardian: \_\_\_\_\_

### Liability Waiver:

I am fully aware that my child's participation in programs, services, activities, facilities and events is completely voluntary. In consideration of my child's participation, I individually, and on behalf of my minor child and our respective heirs, successors, assigns, and personal representatives, hereby release the Town of Normal and its officers, employees, volunteers and agents (in their official and individual capacities) from any and all liability whatsoever for any and all damages, losses, or injuries to person or property or both in connection with my child's participation in the programs, services, activities, facilities and events, including, without limitation, any damages, losses or injuries that may be sustained or suffered by my child or any person in connection with my child's association with, or participation in, activities at, sponsored by, or arising out of the programs, services, activities, facilities and events.

I agree that this Waiver and Release is intended to be as broad and inclusive as permitted by the laws of the State of Illinois, and if any portion hereof is held invalid, it is agreed that the balance hereof shall, notwithstanding, continue in full legal force and effect.

Date: \_\_\_\_\_ Signature of parent/guardian: \_\_\_\_\_

**Emergency Medical Treatment Release:**

In case of medical emergency and you are unable to grant verbal permission for your child to be treated, we request that this form be completed. Naturally, we are hopeful that this permission will not be needed, but illness and accidents sometimes do occur. We will make every effort possible to contact you before taking action, but if emergency room or hospital care is required, this permission is necessary.

Should illness or injury require treatment beyond our transportation efforts or the child is not able to accompany the group on the return trip, the parent or guardian will be held responsible for their transportation and expenses.

**I, the parent/guardian of \_\_\_\_\_ do give permission for all necessary medical treatment for my child.**

Allergies to any medications: \_\_\_\_\_

Allergies to food/food related items: \_\_\_\_\_

any other allergies that need to be made aware of: \_\_\_\_\_

Allergy Reactions: \_\_\_\_\_

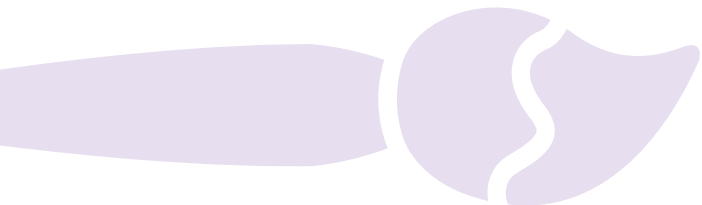
List of medications now taking: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Hospital: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Date: \_\_\_\_\_ Signature of parent/guardian: \_\_\_\_\_



[ChildrensDiscoveryMuseum.net](http://ChildrensDiscoveryMuseum.net)

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