

Westchester Putnam Pottery

Emergency Contact - Medical Information – Release Form for Child

<hr/> <p>Child's Name</p>	<hr/> <p>Date of Birth</p>	M <input type="checkbox"/>	F <input type="checkbox"/>
		Sex	
<hr/> <p>Parent's/Guardian's Name</p>	<hr/> <p>Parent's/Guardian's Name</p>		
<hr/> <p>Home or Cell Phone</p>	<hr/> <p>Work or Cell Phone</p>	<hr/> <p>Home or Cell Phone</p>	<hr/> <p>Work or Cell Phone</p>
<hr/> <p>Email Address</p>	<hr/> <p>Email Address</p>		
<hr/> <p>Address</p>	<hr/> <p>Address</p>		
<hr/> <p>City, State, ZIP Code</p>	<hr/> <p>City, State, ZIP Code</p>		

Alternative Emergency Contacts

<hr/> <p>Primary Emergency Contact</p>	<hr/> <p>Secondary Emergency Contact</p>
<hr/> <p>Home or Cell Phone</p>	<hr/> <p>Home Phone</p>
<hr/> <p>Work or Cell Phone</p>	<hr/> <p>Work Phone</p>
<hr/> <p>Address</p>	<hr/> <p>Address</p>
<hr/> <p>City, State, ZIP Code</p>	<hr/> <p>City, State, ZIP Code</p>

Medical Information

Doctor's Name and Phone Number

<p>Does your child have allergies? ___ Yes ___ No If Yes Please Explain</p>	<p>Medications ___ Yes ___ No Please Explain</p> <p>You are responsible for notifying Westchester Putnam Pottery, LLC if your child has allergies that may require an EPIPEN. You are responsible to provide Westchester Putnam Pottery NY and its staff on its use.</p>
<p>Does your child have any behavioral or learning challenges we should be aware of?</p>	<p>Has your child taken art classes at WPP?</p>

Are you interested in Fall/Winter art classes for your child? Please indicate specific classes/days/times that your family is interested in.

Waiver Release Signature Page

PARTICIPATION WAIVER / RELEASE

By registering for and participating in any Westchester Putnam Pottery, LLC program for either adults or children, participants and/or their guardians agree to expressly assume and accept any and all risks of injury associated with participation. In consideration of being allowed to participate in activities and programs of Westchester Putnam Pottery, LLC and to use its facilities and equipment, participants waive, release and forever discharge Westchester Putnam Pottery, LLC, all its officers, employees, representatives, and all others from any and all responsibilities or liability for injuries or damages resulting from my participation in any activities or my use of equipment rising out of participation in any activities at Westchester Putnam Pottery, LLC.

Westchester Putnam Pottery, LLC is Peanut free. Snacks we provide do not contain peanuts and we ask that you not send your child to class with food that contains peanuts.

Parent's/Guardian's Signature

Date

Parent's/Guardian's Signature

Date

Week _____ Option 1 2 3 4

Week _____ Option 1 2 3 4

Deposit \$ _____

Balance \$ _____