



Daily Family YMCA
7910 E. 134th St. S, BIXBY, OK 74008
GO CLUB REGISTRATION
2017/2018



CHILD'S NAME _____ DATE OF BIRTH _____ M F

CHILD'S HOME ADDRESS _____ CITY/STATE/ZIP _____

HOME PHONE _____ GRADE [Fall '17] _____ AGE _____

SCHOOL ATTENDING _____ PRIMARY CONTACT: MOTHER FATHER EITHER OTHER

PARENT 1 NAME [or guardian] _____ CELL PHONE# _____

E-MAIL _____

EMPLOYER _____ WORK PHONE # _____

PARENT 2 NAME [or guardian] _____ CELL PHONE# _____

E-MAIL _____

EMPLOYER _____ WORK PHONE # _____

CHILD RELEASE AUTHORIZATION/EMERGENCY CONTACT [*3 contacts must be given*]:

NAME _____ RELATIONSHIP _____ PHONE _____

NAME _____ RELATIONSHIP _____ PHONE _____

NAME _____ RELATIONSHIP _____ PHONE _____

Please list any SPECIAL CONSIDERATIONS relevant to your child such as: previous illness, injuries in the past 12 months, activity restrictions, developmental age, allergies, chronic health concerns, etc.

Please list any medications your child is taking _____
 I certify that _____ has been examined by a licensed physician in the past 12 months and is able to participate in the YMCA Child Care program.

NAME OF LICENSED PHYSICIAN _____ PHONE _____

ADDRESS _____
 Street Suite # City Zip

I have read and accept the Parent Handbook, which includes the policies and procedures. I understand and agree to abide by the agreement set forth. I understand I will be given written notice at least 30 days prior to any change of these conditions. The health history is correct, and the child herein described has permission to engage in all activities and field trips, except as noted by me. I understand and am aware that my child will be participating in many physical activities and the potential for accidents does exist. In the event I cannot be reached in an emergency, I hereby give my permission to the YMCA staff to administer first aid and/or transport to the nearest hospital. I give consent for the necessary treatment from physician and/or hospital/clinic. I do hereby agree to indemnify and hold harmless the YMCA of Greater Tulsa and its staff from any and all claims or demands, cost or expense arising out of any injuries, damages or other losses, whether personal or property, sustained by me or any party for whom I am responsible. The YMCA of Greater Tulsa is granted permission to use videos/photographs of my child/ren for promotional purposes.

Signature _____ Date _____
 (Parent/Legal Guardian)

Please circle when your child will participate in our program.

Before School Only

After School Only

Before and After School