



**The Youth & Family Center**  
**Harambee Spring Break Camp Registration Form**  
**March 16-20, 2020**



Child's Name: \_\_\_\_\_ Male \_\_\_ Female \_\_\_ Non-Binary \_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Current School: \_\_\_\_\_ Grade: \_\_\_\_\_

Do you reside in St. Louis Housing Authority Public Housing (This information helps us secure funding for your child's participation in the Youth & Family Center spring break camp)?

Yes  (please provide proof of lease) No

**Parent/Guardian #1**

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

Address \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

**Parent/Guardian #2**

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

Address \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Other persons authorized by parent(s)/guardian(s) to pick up child without prior notification:

Name	Phone	Relationship

If The Youth & Family Center is unable to reach either parent/guardian or emergency contacts, I give my permission to the Youth & Family Center to consult my child's physician, seek emergency medical treatment and/or emergency transportation services if necessary. By signing below

Physician's Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Physician's Address: \_\_\_\_\_

Name of Hospital: \_\_\_\_\_

Insurance information \_\_\_\_\_

\_\_\_\_\_

Signature of Parent/Guardian Date \_\_\_\_\_

**General Information:**

Does your child have any special accommodation needs due to a disability? Please be detailed.

Does your child have any allergies that we should know about? Please be detailed

**Annual Household Income Bracket (Check box that applies)**

\_\_\_\_ Under \$9,999

\_\_\_\_ \$10,000—\$14,999

\_\_\_\_ \$15,000—\$19,999

\_\_\_\_ \$20,000—\$29,999

\_\_\_\_ \$30,000—\$39,999

\_\_\_\_ \$40,000+

Does your Family receive Medicaid or Medicare?

Yes     No

Does your family have private insurance coverage?

Yes     No

**Program Details:**

- Registration is due by Monday (03/09/2020).

**Health History Form**

It's a new year, so we need new Health information.

We will need a copy of your child's up to date immunizations, these forms and all medications will need to be turned in to the Program Manager on Monday, March 16, 2020 during check-in.

**PARENTAL PERMISSION & RELEASE FORM (One per Child)**

Child's Name (please print): \_\_\_\_\_

\_\_\_\_\_ (INITIAL) I give my child permission to attend and participate in all Youth & Family Center Spring Break Camp Activities.

\_\_\_\_\_ (INITIAL) I agree that any pictures and/or videos taken of my child may be used to promote The Youth & Family Center including on our website, social media and promotional materials.

\_\_\_\_\_ (INITIAL) In consideration for my child participating in The Youth & Family Spring Break Camp events and activities I shall indemnify, hold free and harmless, The Youth & Family Center, its officers, employees, and volunteers, thereof from any and all liability, claims or demands for personal injury or sickness, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the child-participant that occur while said child is participating in the above described activity.

\_\_\_\_\_ (INITIAL) I give permission for my child to be treated in case of illness or emergency, and understand I will be notified in an emergency situation.

\_\_\_\_\_ (INITIAL) I also agree to pay any medical expenses incurred for treatment and/or emergency transportation.

Name of Parent/Guardian Signing this form: \_\_\_\_\_

Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

**For scheduling, questions, or to discuss the possibilities...**

Contact Gary Kennedy-Program Manager \* [gkennedy@theyfc.org](mailto:gkennedy@theyfc.org) \* (314)391-4143 Please mail/fax forms to: The Youth & Family Center, 818 Cass Ave, St. Louis, MO 63106.

**Youth & Family Center**  
**Harambee Spring Break Camp 2020**  
**Fieldtrip Permission Slip**

Dear Parent or Guardian:

A field trip has been scheduled for your child's class. The Youth & Family Center policy requires each child to have advance written permission to go on a field trip. *Students who do not have prior written permission will not be able to participate in the field trip.*

Please complete the lower section of this form and return it to The Youth & Family Center Camp Director immediately.

Thank you.

My Child \_\_\_\_\_ has permission to participate in Harambee Spring Break Camp Youth & Family Center activities away from the building, this includes field trips, excursions, walks, etc. with The Youth & Family Center Harambee Spring Break Camp staff.

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**Sign, and return form to The Youth & Family Center.**

I have read the information above and give my permission for my child \_\_\_\_\_  
(student's name)

to attend the field trips with the Youth & Family Center Harambee Spring Break Camp staff

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date