



## **SANDY CLUB**

### **Member Consent, Release & Medical Authorization Form**

*Club Member(s): The child(ren) listed on this form are the Sandy Club member(s).*

Parent/Legal Guardian Name: \_\_\_\_\_

Club Member (Child) Name(s):

\_\_\_\_\_

As the parent or legal guardian of the Sandy Club member(s) listed above, I give permission for my child(ren) to participate in all activities, programs, and field trips offered by Sandy Club ("the Club"). I also consent to my child's participation in Club surveys or evaluations used to improve programming and the Club environment. Participation in surveys is voluntary.

#### ASSUMPTION OF RISK & RELEASE OF LIABILITY

I acknowledge that participation in Club activities involves inherent risks. I voluntarily assume all risks and release Sandy Club, its employees, officers, directors, agents, and volunteers from liability to the fullest extent permitted by law.

#### MEDICAL AUTHORIZATION

I certify that my child is in good health and authorize emergency medical treatment if needed.

#### SUPERVISION & PICK-UP POLICY

Sandy Club is a license exempt facility but is DHHS- Child Care Licensing approved and meets safety and background check requirements. The Club assumes no responsibility once a child leaves the facility. Late pickup fees of \$1.00 per minute apply.

#### CUSTODY & RELEASE INFORMATION

I agree to inform the Club of any custody or authorized pickup changes.

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_