



Youth Program Permission & Information Form

ONE FORM PER CHILD • PER PROGRAM YEAR

Please complete this form for your child to take part in the program named below. The information is kept confidential and is used only for program communication and for your child's safety.

PROGRAM

Program: _____ Meets (day/time): _____

PARTICIPANT

Child's name: _____ Grade / Age: _____

PARENT / GUARDIAN & CONTACT

Name: _____ Relationship: _____

Phone: _____ Email: _____

Email is our primary way of reaching you about this program — including reminders and cancellations. Phone is reserved for emergencies only. By submitting this form, you're giving the Library permission to contact you about this program using the information above.

EMERGENCY CONTACT (if different from above)

Name: _____ Phone: _____

ALLERGIES & MEDICAL NOTES

Please list any allergies (including food) or medical information we should know for this program. Write "none" if not applicable.

PHOTO / MEDIA RELEASE

- ☐ I DO give permission for the Library to photograph my child in this program for Library promotion (website, social media, and displays).
- ☐ I do NOT give permission for my child to be photographed.

The Library does not publish a minor's full name without permission.

AT THE END OF EACH SESSION

- ☐ My child has permission to leave on their own.
- ☐ My child will be picked up by an authorized adult (listed below).

Adults authorized to pick up: _____

ACKNOWLEDGMENT & SIGNATURE

I give permission for my child named above to take part in this Library program. I understand that a Library staff member is present at each session, that the Library is not responsible for supervising my child before or after the scheduled program time, and that my child is expected to follow the Library's behavior expectations. I confirm the information above is accurate and may be used to contact me about this program and in an emergency.

Parent / Guardian signature: _____ Date: _____

Printed name: _____

LIBRARY USE ONLY

Received by: _____ Date: _____ Program yr: _____