



## Emergency & Health Information Form

Athlete's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

### Parent/Guardians Information

Name: \_\_\_\_\_ Cell #: \_\_\_\_\_ Other #: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Cell #: \_\_\_\_\_ Other #: \_\_\_\_\_ Relationship: \_\_\_\_\_

### Emergency Alternates

In the event that the parent/guardian is unable to be reached, please list two people whom you designate to assume responsibility for your child's health care in an emergency or non-emergency.

Name: \_\_\_\_\_ Cell #: \_\_\_\_\_ Other #: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Cell #: \_\_\_\_\_ Other #: \_\_\_\_\_ Relationship: \_\_\_\_\_

### Insurance and Health Information

Insurance Carrier: \_\_\_\_\_ Policy #: \_\_\_\_\_

Address, City, State, Zip : \_\_\_\_\_

Physician: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address, City, State, Zip : \_\_\_\_\_

Allergies: \_\_\_\_\_

Current Medications: \_\_\_\_\_

Current Medical Conditions: \_\_\_\_\_

Past Medical Conditions: \_\_\_\_\_

Concussion History: \_\_\_\_\_

### Permission and Acknowledgement

Athlete Name: \_\_\_\_\_

*Please enroll my child in the HB Lacrosse camp. I hereby release the Hollis Brookline High School, its employees, officials and agents from any and all liability or loss or damage to personal property that my child or I may experience in connection with activities sponsored by Hollis Brookline High School. I hereby consent to emergency medical procedures deemed advisable for my child in the event I cannot be reached and my child has sustained an injury. The High School does not provide accident or hospitalization insurance for participants of its programs. All participants are advised to have adequate personal coverage. Please consider participant's own health, experience and tolerance for risk before participating in any program. I also consent to the use of my child's photo, and/or video.*

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_