

P.A.L.S. 4 Good Program Summer 2017 Schedule

Camp and Meal Information:

Camp Location:	Dates:	Time:	Meal Information:
Seneca Town Hall	June 12 - 16	Noon – 4:00 p.m.	Lunch and Afternoon Snack Provided by PALS 4 Good Staff
Wauzeka Century Hall	July 10 - 14	Noon – 4:00 p.m.	Free Lunch Provided at Wauzeka-Steuben School from 11 a.m. – Noon Afternoon Snack Provided by PALS 4 Good Staff
Bluff View Intermediate School Prairie du Chien, WI Rooms 301 and 323	July 24 - 28	Noon – 4:00 p.m.	Free Lunch Provided at Bluff View from 11:30 a.m. – 12:15 p.m. Afternoon Snack Provided by PALS 4 Good Staff

Permission slip:

My son/daughter _____ has permission to attend and participate in the **PALS 4 Good Summer Program including the field trip**. If emergency medical treatment is required, I hereby authorize the adult chaperones (Kathy Quamme, Amy Mitchell, Rick Peterson) to take any necessary measures.

Signature: _____ Date: _____

Photo release:

I understand that **PALS 4 Good** staff may take photographs/videotapes of participants and activities. I agree that the Crawford County PALS Mentoring Program, CARE, and UW-Youth Development shall be the owners of, and may use, such photographs relating to press coverage of the event or promotion of future events. Use of photos and video include newspaper, posters, and other media.

Signature: _____ Date: _____

Mark **X** here if you **DO NOT WANT** your child's picture/name to appear in any promotional literature

Notification card for emergency or illness:

Child's full name: _____ Birthdate: _____

Parent/Guardian names: _____

Phone (where you can be reached while child is at program): _____

Doctor to be notified: _____ Dr. Phone: _____

Health Insurance Carrier: _____

Policy Number: _____ Policy Holder's Name: _____

Allergies (to include food allergies): _____

Medications: _____

If I cannot be reached, please contact:

Name: _____ Phone: _____

Name: _____ Phone: _____