



**DON'T FORGET THIS!**

this form must be on file with the workshop directors for you to participate

**STUDENT NAME**

**MEDICAL INFORMATION**

*In case of emergency, notify:*

Parent/guardian name: \_\_\_\_\_  
Day phone: \_\_\_\_\_  
Night phone: \_\_\_\_\_  
Cell phone: \_\_\_\_\_  
Alternate Contact Person: \_\_\_\_\_  
Alternate Contact Day Phone: \_\_\_\_\_  
Alternate Contact Home Phone: \_\_\_\_\_  
Family insurance carrier: \_\_\_\_\_  
Group/Policy Number: \_\_\_\_\_

**HEALTH HISTORY:** Please direct our attention to any special medical needs or any other concerns you may have, including any allergies your son/daughter has and/or medication he/she is taking (use back of form if necessary):

**STUDENT'S BIRTH DATE**

**DATE OF LAST TETANUS SHOT**

**EMERGENCY AUTHORIZATION**

Should a participant require medical attention at any time, he/she should tell any staff member or one of the directors. Participants will be taken for the nearest Emergency Room and are expected to pay for their own medication or medical services. The Yearbook U staff is not permitted to dispense drugs or treat injuries.

*In consideration of the benefits, I hereby agree to waive all claims against the leaders of this activity and officers, agents and representatives of Yearbook U. I hereby authorize and give my consent and permission to the adult leaders to obtain medical care as deemed necessary for the health and welfare of the minor and provided under the supervision of a licensed physician or dentist, including but not limited to diagnosis, anesthesia, treatment, surgery, medication or to hospitalize or order injection for the minor named above as provided under Section 25.8 of the California Civil Code. I agree to be responsible for any and all costs. I further authorize the adult leader to receive physical custody of said minor under Section 1283(A) of the California Health and Safety Code upon completion of any treatment, and I specifically instruct any health facility to surrender the physical custody of said minor to the adult leader. I certify that I am the parent having legal custody, or one of the parents having legal custody, or the legal guardian of the minor named above.*

Should my son/daughter need medical attention, please admit him/her to the nearest hospital and contact me immediately:

**PARENT SIGNATURE**

**PARENT NAME**

**WORK PHONE**

**HOME PHONE**

**CELL PHONE**

**SCHOOL NAME**

**CODE OF CONDUCT**

While you are guests at the Bellerme College Preparatory Campus, you will be expected to adhere to Yearbook U regulations. We take for granted that, as representatives of your schools and attendees at Yearbook U, you are eager to learn, make friends with staff members from other schools and prepare yourself for your upcoming role on staff.

**The following rules and regulations are necessary for your safety and the success at Yearbook U.** Failure to comply with any of these may result in notification of parents and/or dismissal from Yearbook U. Any student dismissed will be expected to be off campus within two hours of the offense, either with a parent or via public transportation at the participant's expense.

**Leaving campus and/or entering any motorized vehicle is prohibited (this includes your own vehicle).** Violation of this rule may result in your dismissal from Yearbook U. Advisers or representatives who must transport students during the Workshop must sign students out in the Yearbook U Office prior to leaving campus. Parents may arrange to have their son/daughter leave campus (church, summer school, previous obligation, etc.), but written permission to do so must be presented to Yearbook U Directors prior to leaving.

**Any destruction of school or Yearbook U property is prohibited. All attendants are expected to attend all classes and planned activities, unless absence has been cleared with Yearbook U Directors.** We use an Honor System where roll is taken on a random basis. Students who are not present for attendance or who are found away from their assigned location will have parents and/or advisers contacted for the first offense, and may be subject to dismissal.

**Disrespectful conduct will not be tolerated. Use or possession of alcohol, cigarettes, or illegal drugs is prohibited. No second chances.** Parents will be contacted immediately, and students will be dismissed from Yearbook U.

**STUDENT AGREEMENT:** I agree to honor the above rules and regulations and understand that violations will result in corrective measures, including possible dismissal from Yearbook U.

**STUDENT SIGNATURE**

**STUDENT NAME**

**PARENT AGREEMENT:** My son/daughter has permission to attend Yearbook U and its activities. I also agree to the above rules and to honor the consequences spelled out.

**PARENT SIGNATURE**

**PARENT NAME**