

SUMMER CAMP EMERGENCY CARD

FOUNTAIN VALLEY HIGH SCHOOL

Student _____ Sport _____ Grade Level _____ Birthdate _____

Address _____ City _____ Phone _____

Student lives full time with _____ Parents _____ Legal Guardian _____ Other _____

EMERGENCY CONTACTS

a) Parent/Guardian(s) _____ Phone _____

_____ Phone _____

b) Other _____ Phone _____

INSURANCE INFORMATION

_____ My son/daughter (or ward) is covered for the above activity under our family Health/Medical Plan which provides a minimum coverage of \$1,500 as required by Ed Code #32220-24

Name of Company _____ Subscriber _____ Policy # _____

_____ I have purchased the school insurance plan. (Verified by Financial Clerk _____)

PHYSICAL INFORMATION

A physical is required to participate in any athletic activity. Please initial below:

_____ Medical Physical Completed (Verified by the Athletic Trainer _____)

MEDICAL TREATMENT INFORMATION

Warning: The undersigned Parent/Guardian understands and accepts that this Activity involves potential risk, including personal injury, potential for exposure to illness or disease, including, but not limited to Covid-19, and accept such risk.

Please read and initial below:

_____ **USE OF TRAINER CONSENT:** I give permission for the Athletic Trainer to administer first aid, follow-up treatment and rehabilitation when appropriate in his/her professional judgment as approved by the consulting physician.

_____ **MEDICAL CARE/TREATMENT CONSENT:** In the event of an accident/emergency, I give permission for the school authorities to take my (our) child to any available doctor or hospital. If you do not initial on the line what action would you like the school to take _____

_____ The student athlete is currently taking the following **MEDICATIONS** _____

_____ The student athlete has the following **ALLERGIES** _____

RULES OF CONDUCT

Student is expected to conduct him/herself as a gentleman/lady at all times. The following actions constitute grounds for suspension from athletic activity.

a) Profanity at an athletic event

d) Theft

b) Improper conduct at an athletic event or on a bus

e) Unauthorized use of school equipment/facilities

c) Defiance of authority

f) Use or possession of tobacco, alcohol or drugs

The parent/guardian signing this document for the above named child, hereby agrees to release, hold harmless, and to indemnify the Huntington Beach Union High School District, its High Schools, its governing board, its officers, employees, and agents, including camp coaches at the camp my child is attending for any injury, illness, disease, property damage or for other harm they incur during the camp. The undersigned agrees to assume all risks arising from, or relating to, camp activities.

Date

Signature of Parent/Guardian

Signature of Student