



Hui Pepe'e Summer Program Registration Form 2019

Child's Name: _____ Preferred Name: _____

School child attends: _____ Grade: _____

Pick-up Consent: List names and relationships you give consent to pick up your child on this form. (besides parents above)

1. _____ 2. _____ 3. _____
Name Relationship Name Relationship Name Relationship

Camp Shirt Sizes: Youth Size: XS S M L XL

Please explain how much exposure your child had with Hawaiian Language and Culture.

HEALTH INFORMATION

Emergency contacts (other than parents) that staff can contact during your child's attendance at the program:

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Are all school required immunizations up to date? Yes No Date of last Tetanus Booster: _____

Please list any allergies your child may have: _____

PLEASE NOTE: *All medications must be in their original containers, plainly marked with child's name, the name of the medication and the dosage.*

This Health Information is correct and my child has my permission to engage in all program activities, except if specified. I hereby give permission to Hui No Ke Ola Pono to secure medical and surgical treatment and to provide routine non-surgical medical care for the child named above while attending the summer program. **I understand Hui No Ke Ola Pono does not carry any health and accident insurance on summer program participants.**

Signature of parent/guardian

Date

PHOTO RELEASE WAIVER

I give permission and consent to the use of any photographs, videotape or other media record of my child's participation at Hui No Ke Ola Pono for any lawful purpose, without compensation to me or on my behalf. If I choose not to be photographed, videotaped or in other recorded media, it is my responsibility to inform the photographer and/or remove myself from the picture. The pictures taken will be used for the Hui's program brochures and marketing media.

Signature of parent/guardian

Date