

# Participant Emergency Information

Participant Last Name: \_\_\_\_\_

Site: \_\_\_\_\_ Program: \_\_\_\_\_



PORTLAND PARKS & RECREATION™  
Healthy Parks, Healthy Portland



## CONTACT INFORMATION

Name: \_\_\_\_\_ Goes By: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Pronouns: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_ Primary Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Phone 2: \_\_\_\_\_ Phone 3: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

### If we are UNABLE TO REACH YOU in case of an emergency, who should be notified? List in order of preference.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**CHILD PICK UP:** Who will typically pick up your child? \_\_\_\_\_

### People OTHER THAN YOURSELF allowed to pick up your child:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**MEDICAL INFORMATION:** Health Insurance Provider: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Does the Participant have a disability requiring any accommodations?  Yes  No

If yes, please explain: \_\_\_\_\_

If yes, have you contacted the Portland Parks & Recreation Inclusion Specialist at (971) 284-5060?  Yes  No

Asthma/Respiratory Condition  Hearing Impaired/Deaf  Sun Burns Easily  Diabetes  Unusual Bleeding

Seizures, Type & Frequency \_\_\_\_\_

Bee Sting Allergy: \_\_\_\_\_ Reaction: \_\_\_\_\_

Pollen or Food Allergies: \_\_\_\_\_ Reaction: \_\_\_\_\_

Medication Allergies: \_\_\_\_\_ Reaction: \_\_\_\_\_

**\*If your child has medications that need to be administered during program hours, you will need to complete a medication administration form. Forms are available at the front desk or online.**

**SUNSCREEN:** PP&R Staff may direct my child and/or assist my child apply sunscreen to exposed areas of skin  Yes  No

## CAMPER BEHAVIOR

When your child gets frustrated or upset, how do they typically display their anger or frustration?

What's the best way to calm your child down when they get upset? What do they respond to?

Is there any information you would like Parks staff to know that you feel would help your child have a successful experience?

## SWIMMING INFORMATION – For your child's safety & security, we require the following information:

Does your child need to wear a life jacket when in the pool?  Yes  No

**If NO** - Can your child independently swim the length of the lap pool and complete a swim test if the pool has a depth of greater than 3 ft?  Yes  No

**If NO or your child does not successfully complete the swim test, they will be required to wear a life jacket.**

**MEDICAL EMERGENCY WAIVER:** In participating in programs sponsored by Portland Parks and Recreation, I hereby acknowledge that I am the legal guardian for the above-named participant. I understand there are risks of accidents, resulting in bodily harm to my child named above, arising out of those activities. I hereby acknowledge that my child has the physical capacity reasonably necessary to engage in each activity for which I have enrolled them. However, I do hereby waive all claims, which I might have against the City of Portland, or any of its officers, agents or employees by reason of bodily injuries or death, that my child might suffer arising out of their participation whether or not caused by the City's negligence. In case of emergency, accident or illness, I give my permission to have my child treated by a professional medical person, transported by medical staff and admitted to a hospital if necessary. I agree to be the party responsible for all medical expenses, and loss of personal property, incurred in my child's behalf.

**FIELD TRIP WAIVER:** I also give permission for the above-named child to participate in supervised neighborhood walks and off-site field trips with Portland Parks & Recreation staff. I understand for off-site field trips, my child will be transported in chartered school buses, in City of Portland 14-passenger mini-bus vehicles and/or public transportation within Oregon unless otherwise stated.

Parent/Guardian Signature \_\_\_\_\_

Today's Date \_\_\_\_\_