

Student's Last Name _____

The Cordova Tutorial Medical Release Form 2018-19

Parents first and Last Names: _____

Full Student Name: _____ **DOB:** _____

Full Student Name: _____ **DOB:** _____

Full Student Name: _____ **DOB:** _____

Complete Address: _____

Home Phone: _____ **Mother's Cell #:** _____ **Father's Cell #:** _____

Emergency Contact other than parent: (name, relationship to student, phone number)

List any known medical conditions or allergies by child: _____

Medications taken regularly by child. _____

Family physician: _____ **Phone #:** _____

I hereby give permission for my child/children listed above to take part in The Cordova Tutorial sponsored classes. I authorize any representative of The Cordova Tutorial to render first aid to my child and/or to transport him/her to a medical treatment facility and/or to call an ambulance. It is understood that all costs for transportation arrangements and costs associated with examination and treatment are SOLELY at my expense. I further give my permission and authorize any representative of The Cordova Tutorial to secure needed medical attention or treatment on the advice of any licensed physician and from a licensed physician, hospital, or medical clinic in the event that I cannot be reached for such permission. I release any representative of The Cordova Tutorial as a group or individually from any and all liability for accident, injuries, or loss of life suffered or for efforts to administer first aid for same as a result of involvement with The Cordova Tutorial classes and activities. I further understand and agree that in the event that the above named sons/daughters are involved in activities that violate or compromise the rules, or purposes of The Cordova Tutorial, I will pay and accept full responsibility. I understand that I am responsible for how my child arrives and leaves the campus. I have read and understand this Medical Release and Waiver. I accept and assume any and all risks of accident, injury, or loss of life associated with the activities of The Cordova Tutorial. This release is valid and irrevocable for the current calendar year of The Cordova Tutorial activities.

Signature of Parent/Guardian: _____

Date: _____

Relationship to Student: _____