



# PERMISSION FORM

Parent or guardian MUST complete and sign one form for each student before student may attend the 2005 Taylor-Arkansas Yearbook Workshop.

Forms must be received by June 15, 2005. Please print or type the necessary information and mail completed permission forms to:

Felicia Jewell, Taylor Publishing Company, 2250 Westerman Drive, Benton, AR 72015

## STUDENT INFORMATION

Student Name (First & Last) \_\_\_\_\_

School \_\_\_\_\_ E-mail \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Birth Date \_\_\_\_\_ Sex \_\_\_\_\_

## PARENT/GUARDIAN INFORMATION

Parent or Guardian's Name \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Additional Phone \_\_\_\_\_

## PHYSICIAN INFORMATION

Family Physician \_\_\_\_\_ Office Phone \_\_\_\_\_

Physician's Office Address \_\_\_\_\_ City \_\_\_\_\_

## HEALTH INFORMATION

Is there anything we need to know about your health or physical condition (i.e. food and drug allergies; medical conditions, etc.)?

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Please give us your Insurance Company's name and your Policy Number in case of emergency:

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## RELEASE INFORMATION

I understand that all the information on this permission form is confidential and is requested only for the 2005 Taylor-Arkansas Yearbook Workshop in caring for the health needs of the workshop attendees. As the legal guardian of the attending student listed on this form, I hereby authorize the workshop directors (Felicia Jewell and Susan Alderson) to secure any emergency examinations and treatments which are deemed necessary while the above named student is at the yearbook workshop. I understand that in case of a serious illness or injury, the parent or guardian listed above will be notified. However, should efforts to contact the parent or guardian fail and emergency treatment is deemed necessary, we empower the workshop directors to assume responsibility for obtaining said treatment from a licensed medical facility at the family's expense. We hereby release the Arkansas 4-H Center, Taylor Publishing Company, the workshop directors and student's official school chaperone from any and all liability for any injuries sustained as a result of any accidents caused by the negligence of the participant.

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