

The Neighborhood Center

Permission and Registration Form – **School Year** **2025-2026**

Today's Date _____
Program _____

Elementary

Teens Program

Child's Name _____ Age _____

Address _____ Zip _____

House Phone _____ Cell Phone _____

School _____ Grade _____ Date of Birth _____

Guardian's Name _____ Relationship to Child _____

Does the child have a sibling that attends The Neighborhood Center? _____ Yes

_____ No

If yes, what is the sibling's name?

Emergency Phone Number (different than above)

Name of person whom we would be talking to:

How did you learn about The Neighborhood Center? _____ Friend _____ School
_____ Flyer _____ Poster _____ Sign in Window _____ Other (explain)

In the event of an emergency, I give representatives of The Neighborhood Center the power to authorize emergency medical care for (Name of Child)

Is your child allergic to anything? Yes _____ No _____

If Yes, Please List:

Does your child have any medical problems? Yes _____ No _____

If yes, please list:

The undersigned recognizes that children from time to time have accidents despite reasonable care of staff and volunteers. In consideration of the services to be rendered to the undersigned by The Neighborhood Center, the undersigned for him/herself and his/her heirs, personal representatives and assignees, hereby Releases and present and future claims, demands, obligations, liabilities, and rights of action which might be asserted against The Neighborhood Center and any of their employees and volunteers while the undersigned is under the supervision of The Neighborhood Center.

Name of Child:

Please give your approval by initialing each statement below:

_____ As parent and/or legal guardian of the participant named on this Permission and Registration form, I/we hereby grant my/our full consent and approval for my/our child(ren) to participate in the programming and/or field trips offered by The Neighborhood Center. By signing this document, I/we agree to abide by all the rules, regulations, and decisions of the Staff and Board of Directors of The Neighborhood Center.

_____ I/we, the undersigned, understand that there are certain risks of injury inherent in participation in Center programming and/or field trips. I/we am/ are willing to assume these risks on behalf of my/our child (ren). In addition to giving my/our full consent for my/our child(ren)'s participation, I/we do hereby remise, release, forever discharge, waive, absolve, indemnify and agree to hold harmless The Neighborhood Center Staff, Board of Directors and any and all agents, servants, employees or workmen. I/ we, the undersigned, assume all financial responsibility for payment of medical/dental expenses for the named participant(s). The Neighborhood Center organization assumes no liability or costs in the event of injury, death or illness of any kind, due to participation in programming and/or field trips.

_____ I/we grant and empower The Neighborhood Center and all its directors, employees, contractors and any other person assigned or acting on its behalf, to act as guardian/spokesman in granting permission for giving of routine medical care and or transportation, emergency treatment/hospitalization as may be deemed necessary, appropriate or beneficial at the time relating to or concerning our child.

_____ I/we grant to The Neighborhood Center, its representatives and employees the right to take photographs and videos of participant and their property in connection with the above identified subject(s). I authorize The Neighborhood Center, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

_____ I agree that The Neighborhood Center may use such photographs and videos of participant with or without participant name and for any lawful purpose, including, for example, such purposes as publicity, illustration, advertising, and Web content.

_____ My child has permission to access the internet when using the Center's computers.

Parent or Guardian's Signature _____

Date _____

The Neighborhood Center

Business Address: 344 N 7th St. - Allentown, Pa. 18102

Phone: 610-434-5799

kberard@theneighborhood-center.org