



2019

CONFIDENTIAL MEDICAL INFORMATION
RELEASE FORM FOR CO-CURRICULAR ACTIVITY

This form MUST be complete and signed by the student's parent/guardian to be valid. This form gives consent for any approved Mesa Verde Middle School or Mesa Verde Middle School staff/chaperone to secure emergency services (medical dental, paramedic ambulance) for the student at the parent/guardian's expense.

CONTACT INFORMATION - PLEASE PRINT CLEARLY
STUDENT NAME: GRADE (FALL):
STUDENT HOME ADDRESS: CITY: ZIP:
GENDER: M F BIRTHDATE: MAILING ADDRESS (IF DIFFERENT THAN HOME):
INSTRUMENT: CITY: ZIP:
HOME PHONE: PARENT NAMES:
STUDENT'S CELL: MOTHER: FATHER:
STUDENT'S EMAIL: PARENT'S CELL PHONE NUMBERS:
MOTHER: FATHER:
MUSIC PROGRAM: PARENT'S EMAIL ADDRESSES:
SUMMER MUSIC AT MESA VERDE MOTHER: FATHER:
EMERGENCY (NON-PARENT/GUARDIAN) CONTACTS
FIRST PERSON TO CONTACT RELATIONSHIP: PHONE NUMBER:
SECOND PERSON TO CONTACT RELATIONSHIP: PHONE NUMBER:

Information helpful to a physician in case of emergency and information school staff/chaperones need to be aware of for the student's safety. The parent/guardian is responsible for ensuring this information is updated.

Medical problems (i.e. Diabetes, Asthma, Seizures):

Usual Symptoms:

* Care OR medication needed:

Allergies (i.e. food, bee stings, medication):

Usual Symptoms:

* Care OR medication needed:

Is the student currently under medical care? Yes No Explain:

Are there any other factors that may affect the care of your student? (if yes, be specific):

* If medication(s) are required, please fill out Form B with Parent, Student and Physician Signature. All medication/vitamins must be in their original containers.

I UNDERSTAND THAT BY SIGNING THIS FORM: I give permission for staff/chaperones to provide first aid care and secure emergency care at my expense if needed.

I release the Poway Unified School District, its officers, employees, agents, staff and chaperones from any and all liability, loss, expense or claim for illness, injury or damages that may arise from participation in the Mesa Verde Middle School Music Program and Mesa Verde Middle School Music Program or any associated activity.

Signature of PARENT/GUARDIAN Date INSURANCE COMPANY POLICY/GROUP Number