



**The Children's Museum of New Hampshire
Program Registration and Health Form**

Program(s) registered for: _____

Dates of Program(s): _____

Child's Full Name: _____

Child's Age: _____ DOB: _____ Gender: _____

Parent/Guardian Full Name: _____

Complete Mailing Address: _____

Daytime Phone: _____

Evening Phone: _____

E-mail Address: _____

Authorized Escorts: *(please list the names and telephone numbers of other individuals who are allowed to pick your child up from the program)*

Name: _____ Phone: _____

Name: _____ Phone: _____

Emergency Contact *(other than parent)*: _____

Daytime Phone: _____

Relationship to child: _____

I hereby give permission for the instructors or director of the Children's Museum of New Hampshire programs to give my child simple first aid when necessary. In the event that I cannot be reached in an emergency, I hereby authorize Children's Museum staff or medical personnel to take emergency measures as needed.

Signature of parent/guardian: _____ Date: _____

Health Information

Does your child take prescription medication regularly? YES NO
If yes, what kind?

Does this medication need to be dispensed at the program? YES NO
(If yes, please note that medication must be in the original container and be accompanied by written instructions.)

Does your child have any allergies? YES NO
If yes, what kind? Are there any special procedures to be aware of in case of emergency?

Is there any other information that Children's Museum of New Hampshire staff should know to make sure that your child has a positive experience (behavioral concerns, special needs, etc.)?

Photo/Video Release

Please select one of the following options:

- By checking this box, I hereby consent to the use of photograph(s) and/or video footage of my child for publicity and promotional purposes by the Children's Museum of New Hampshire, and I waive all claims for compensation for such use, or for damages.
- I do not wish to have my child photographed in any way.

Signature of parent/guardian: _____ Date: _____