

First Name:		_ Last Name:	
Grade	County:	School_	

Eastern Shore Leadership Conference: April 27, 2024

## STUDENT PARTICIPANT EMERGENCY INFORMATION FORM

*Parent/Guardian:		*Cell Pho	*Cell Phone *			*Work Phone		
Emergency Contact: (If parents cannot be reached)			Home Phone:		Daytime Phone			
Who is responsible for medical payments?		School Insurance? Day:   Yes   No		School Insurance:				
☐ Individual ☐ Insurance		24 Hour ☐ Yes ☐ No			Company Name:			
Private Medical Insurance?		Private Medical Insurance		Policy Number:				
☐ Yes ☐ No		Company Name						
Date of last Immunization Booster:			Poison Oak/Ivy  Ragwee		☐ Other (Describe):			
		•	n? ☐ No ☐Yes If yes,		A de la	To Today and		
			s MUST be listed in the registration		An adult may provide my child with: ☐ Tylenol ☐ Advil ☐ Either ☐ Neither			
BRIEF MEDICAL HISTORY (Spe	ecial Health Condition	ons – diabetes, seizu	ures, etc.)					
readable!) This t	form will be shre	edded after this e				act information is accurate (and any changes or updates.		
Describe any activity in which	ı participant may <u>l</u>	<u>NOT</u> participate:						
		×	* <mark>Parent/Guardian Pi</mark>	<b>ERMISSION</b>				
I, the parent or legal guard						gnee to obtain medical care for my		
						ires medical attention. I grant to a		
						t are essential for the treatment of		
				s employees, an	d agents from any o	damages, liability, or loss resulting		
from their securing, in goo	d faith, medical	•		OT he wood if resu	a a f a a/)			
Photographs of the student	t named above		ERMISSION (names will NO			ship wahaitaa		
		LIVIAT LIVIA	i NOT be posted on or us	sed by MASC or C		snip websites.		
Parent/Guardia	n Signature:_				Date:			
MASC PARTICIPANT CONTRACT  I hereby state that the information provided above is accurate to the best of my knowledge and further agree to participate fully in this Maryland Association of Student Councils event and will comply with the policies and procedures set forth. I further agree to follow all rules and regulations set up by the Maryland Association of Student Councils and my school. Failure to follow these rules or regulations, failure to comply with instructions from advisors or other authorities, or failure to conduct myself in a manner considered to promote a safe and successful experience will result in an immediate removal from the event without refund of charges for my participation.								
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