PARTICIPANT INFORMATION FORM	PEACEBUILDERS INITIATIVE 2011-2012

The following information will be kept on file in the Peacebuilders Initiative office.

Participant's Name			
Address			
Birth Date	Age	Grade Entering	☐ Male ☐ Female
Mother/Legal Guardian			
Address		Email Address:	
Home Phone		Pager/Cell Phone	
Work Phone		Work Address/City	
Father/Legal Guardian			
Address		Email Address:	
Home Phone		Pager/Cell Phone	
Work Phone		Work Address/City	
Parents are ☐ married ☐ separated ☐ divorced ☐ other:			
Participant's Physician		Phone	
Do you have allergies? ☐ yes ☐ no Explain:		Medical conditions/limitations? ☐ yes ☐ no Explain:	
Dietary restrictions? ☐ yes ☐ no Explain:		Are you on medication? ☐ yes ☐ no Explain:	
Are your immunizations up to date? ☐ yes ☐ no Explain:		When was your last tetanus shot? Month/Year:	
Please rate your general health ☐ good ☐ average ☐ poor			

EMERGENCY NUMBERS AND TRANSPORTATION AUTHORIZATION

Please list those authorized to transport participant to and from CTU. In the event that someone who does not usually transport participant should arrive for pick-up, they will be requested to produce a photo ID before a participant will be released. The individuals listed below will also be contacted in the event of an emergency or illness if we are unable to reach you.

Name	
Relation	Phone
Name	
Relation	Phone
Name	
Relation	Phone
Signature of Parent/Legal Guardian	Date

EMERGENCY CARE AUTHORIZATION

Insurance Provider:	Insurance Authorization #:

In the event of any emergency, I hereby authorize Catholic Theological Union/Peacebuilders Initiative staff to secure from any licensed hospital, physician, or medical personnel any treatment deemed necessary for my child's/ward's immediate care and agree that I will be responsible for payment of any and all medical services rendered.

I also authorize staff to administer CPR & First Aid for which they are trained. In case of an accident or health emergency, paramedics will be called.

Signature of Parent/Legal Guardian	Date

AUTHORIZATION TO PARTICIPATE IN OUTDOOR ACTIVITIES

My child has my permission to participate in all outdoor activities at the Peacebuilders Initiative. All outdoor activities will be scheduled on a daily basis, weather permitting. Any scheduled trip off the CTU premises will require a signed permission form. I understand that my child will be supervised and the safety rules will be enforced. This is not intended as a waiver or release of any legal responsibility. Those participants not having signed permission forms will not be allowed to participate in the program.

Signature of Parent/Legal Guardian	Date

RELEASE FOR PUBLICITY AND INFORMATION

For the duration of the Peacebuilders Initiative photographs, interviews, and videos of participants, staff, faculty, facilitators, guest speakers, partners, advisory board members and the program may be used for publicity and informational purposes. My child has my permission to participate in photos, interviews, and videos while participating in the Peacebuilders Initiative.

Signature of Parent/Legal Guardian	Date