

(one per child)

A. Student Name _____ Boy _____ Girl _____ Age _____
Attending _____ Date of Birth _____ Grade (Sept. 2019) _____
Parent's or Guardian's Name _____
Mailing Address _____ Zip _____ Home Phone _____
Mother Work # _____ Cell # _____ Father Work # _____ Cell # _____
Mother E-mail Address _____ Father E-mail Address _____

Full time Holland Hall faculty/staff? Yes No
Did student attend Holland Hall Summer Programs last year? Yes No
Are you interested in receiving Holland Hall Admission Information? Yes No

B. EMERGENCY AUTHORIZATION / CONSENT: I/We the undersigned parent(s) or legal guardian(s) of the minor listed:

Do hereby give authorization/consent for medical treatment. In the event my child becomes ill or injured at Holland Hall, or, during a Holland Hall related activity or trip, Holland Hall is authorized to take one or more of the following actions: a) provide first aid; b) release my child to the person listed below; c) take my child to the physician or call the physician indicated; or, d) take my child to a hospital and/or give consent for emergency care.

Other Person to contact in emergency:

Name _____ Relation _____
Home Phone _____ Work Phone _____ Cell Phone/Pager _____
Doctor _____ Office Address _____ Phone _____

Please indicate any significant health history that requires special attention: _____

PLEASE LIST ALLERGIES:

- C. **MEDICAL RELEASE:** I hereby certify my child is in good health and may participate in all activities.
- D. **FIELD TRIP RELEASE:** My child has permission to attend any field trips associated with HOLLAND HALL SUMMER PROGRAMS in which they are enrolled at Holland Hall.
- E. **PUBLIC RELATIONS RELEASE:** I hereby permit Holland Hall to use, in whole or in part, photographs, videos, written extractions, and voice recordings of my child for the purpose of illustrations, publications, and media relations.
- F. **ENROLLMENT AGREEMENT:**
1. The student will receive instruction, guidance, and encouragement in keeping with Holland Hall's statement of purpose and values.
 2. The school reserves the right to dismiss any student whose conduct is not in harmony with school standards.

Parent/Legal Guardian Signature _____ Date: _____