

Sugarbush Day School Registration Form:

Registration Date: _____

Child Information

1st Child First Name: _____ Last Name: _____

Name child prefers to be called: _____

Child's Home Address: _____

Gender: Male Female Date of Birth: _____

List any existing medical conditions, medication and/or special attention your child may require?

Allergies: _____

Pediatrician's Name: _____ Phone: () _____

2nd Child First Name: _____ Last Name: _____

Name child prefers to be called: _____

Child's Home Address: _____

Gender: Male Female Date of Birth: _____

List any existing medical conditions, medication and/or special attention your child may require?

Allergies: _____

Pediatrician's Name: _____ Phone: () _____

Parent/Guardian Information

Mother/Guardian First Name: _____ Last Name: _____

Address: _____

Home Phone: () _____ Cell Phone: () _____

Email: _____

May we contact you through email for scheduling, billing or other questions? Yes No

Father/Guardian First Name: _____ Last Name: _____

Address: _____

Home Phone: () _____ Cell Phone: () _____

Email: _____

May we contact you through email for scheduling, billing or other questions? Yes No

Emergency Contacts & Authorized Pickup Persons: We must have at least 1 emergency contact **other** than parents on file here at the Day School; this person does not have to be here present at the Resort. We need contact with someone other than parents that will have basic information on your family in case you cannot be reached.

Emergency Pick Up Name: _____ Phone: _____

Relationship to the Child: _____

Able to pick up all children in the family

Not able to pick up the following children: _____

Contact/Pick Up Other than Parent Name: _____ Phone: _____

Relationship to the Child: _____

Able to pick up all children in the family

Not able to pick up the following children: _____

Contact/Pick Up Other than Parent Name: _____ Phone: _____

Relationship to the Child: _____

Able to pick up all children in the family

Not able to pick up the following children: _____

Additional Comments & Information:

Is there is any other information that that would be helpful to our management and teaching staff?

THIS APPLICATION CONTAINS A RELEASE AGREEMENT. PLEASE READ CAREFULLY BEFORE SIGNING.

IN CONSIDERATION of Sugarbush Day School's agreement to accept my above-named child in their program in reliant promise in accordance with the established fee schedule, the undersigned parent or legal guardian on behalf of myself and child, hereby agree to the terms and conditions as follows:

ASSUME AND ACCEPTS ALL RISKS, which may be associated with or result from my child's participation in said Sugarbush Day School program

RELEASES Sugarbush Day School, Sugarbush Resort, Summit Ventures NE, LLC, d/b/a Sugarbush Resort, its owners, partners, and employees from any and all liability for damage, injury, or illness to my child or to any person or property while he/she is in the program, accepting full responsibility myself for any and all such damage or injury of any kind which may result.

AGREES to indemnify and hold harmless the Sugarbush Day School and its agents from and against any liability or damage they may incur as a result of any harm injury or loss which my child may cause, or to which he or she may contribute to any child participating in the Sugarbush Day School Program

I GIVE PERMISSION to the Sugarbush Day School to call a doctor and to transport my child to the Mad River Valley Health Center, or nearest physician in the event of an injury or medical emergency. I give permission to the Sugarbush Day School to apply a sunscreen lotion to my child. I give permission to the Sugarbush Day School to transport my child, if enrolled in the PreK program, on a Sugarbush Resort shuttle, which is NOT equipped with safety belts, to and from the ski slopes.

PHOTO AGREEMENT I also hereby consent for all purposes to the sale, reproduction, and/or use of photographs, video, and or film of me or my child (with or without the use of my/our names) by Sugarbush and any nominee or designee (including any agency, client, or periodical) in all forms and media in all manners with consent for purpose of media production or printed materials, in any manner without compensation. I release the photographer, Sugarbush, and nominees or designees from any liability for any injury or death that may occur as a result of my performing as a model. I hereby agree that I shall not make any claim for compensation the use of my likeness in any of the foregoing media.

I HAVE READ THIS STATEMENT AND UNDERSTAND ALL OF ITS TERMS.

Parent/Legal Guardian's Signature: _____ Date: _____