

Your whole day

**\$15 Early Registration before 4/22

** \$20 Registration received after 4/22

Checks payable LAPS

LAYL
est. 2005



WILD DAY

Saturday April 27th, 2013
Grades K-6 – 10:00 a.m. – 3:00 p.m.

Child's Name _____ Male Female (Circle)

School _____ Grade _____ Age _____ DOB _____/_____/_____

Child's Address _____ City _____ State _____ Zip _____

Mother's Name _____ Father's Name _____

Email address _____ Email Address _____

Home Phone _____ Home Phone _____

Cell/Other _____ Cell/Other _____

*MUST be listed as required by state licensing

*Allergies (food/medical) or special medical problems: *Write "none", if none known* _____

*Child's Doctor _____ Phone _____

EMERGENCY CONTACTS: (Photo ID required for pick-up.)

*Name _____ Phone _____

*Name _____ Phone _____

My child will participate in the following events:



K-3: Art Camp	K-3: Outdoor Activities
4-6: Outdoor Activities	4-6: Art Camp
_____ Lunch (12:00pm-1:00pm) Silly Sandwich	If your child as a severe food allergy, please pack a lunch.

LIABILITY WAIVER, EMERGENCY MEDICAL AUTHORIZATION, and MEDICAL TRANSPORTATION

I am responsible for my child's actions and medical condition during the LAYL Wild Day event. I waive my rights to damages and hold harmless Los Alamos County, County staff, Los Alamos Juvenile Justice Advisory Board- Los Alamos Youth Leadership, and any other sponsors, agencies, & individuals involved or associated with this event. If my child requires medical attention during the meet, I consent for him/her to receive medical attention by any authorized medical personnel. I hereby grant full permission to use any photographs, video, receive medical attention by any authorized medical personnel. I hereby grant full permission to use any photographs and/or video,

Parent or Guardian Signature _____ Date _____

To register, mail check to Los Alamos Family YMCA, 1450 Iris Street, Los Alamos, NM 87544

