

**MEDICAL FORM**

March Break Madness 2019 at the Canada Games Complex

NAME OF CHILD \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NO. \_\_\_\_\_ BIRTH DATE \_\_\_/\_\_\_/\_\_\_  
mo day year

PARENT/GUARDIAN \_\_\_\_\_

HOME PHONE \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_

AN ALTERNATE IN CASE OF EMERGENCY \_\_\_\_\_

PHONE NO. \_\_\_\_\_

FAMILY DOCTOR \_\_\_\_\_ PHONE NO. \_\_\_\_\_

HEALTH CARD NO. \_\_\_\_\_

Allergies (drug, food etc.) \_\_\_\_\_

Disabilities/Special Needs  
\_\_\_\_\_  
\_\_\_\_\_

Information and suggestions regarding special needs  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is your child a non-swimmer that will require a lifejacket?  
YES NO

Does your child have permission to take the swim test that would give them  
permission to swim in the deep end of the pool?  
YES NO

Please fax back to Alexa at 345-4520 or email to [afares@thunderbay.ca](mailto:afares@thunderbay.ca)

# Photo/Video Release Form



Event or Occasion: March Break Madness - CGC

Date: March 11 to 15, 2019

Organization: Canada Games Complex

Person taking photo: Children & Youth Staff and authorized photographer

I understand that the Recreation & Culture Division of the City of Thunder Bay is compiling a photo/video library for promotional purposes.

I consent to the use of photos or video that may include myself and/or my child by the City of Thunder Bay Recreation & Culture Division for the purpose of any publicity or advertising trade, or any other lawful purposes. I waive any right to inspect or approve the finished product.

This is a photograph/video of: (child's name)

\_\_\_\_\_

I have read this release and am in full understanding of its content.

Authorization given by:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Notes: \_\_\_\_\_

Photo Id, number or description: