

**2010-2011
LINDENWOOD LIFE CENTER
(Grades K-8)SCHOOL'S DAY OUT REGISTRATION
GUEST REGISTRATION—FRIDAY NIGHTS @LINDENWOOD
2400 UNION AVE. MEMPHIS, TN 38112
327-LIFE**

CHILD'S NAME _____	SCHOOL _____
Birthdate ___/___/___ Age _____	Circle: M F Grade 2010-11 _____
Parent's Name _____	
Home Address _____	City _____ St _____ Zip _____
Home # _____	Work # _____ Cell/Beeper _____
e-mail: _____	
FNL GUEST OF: _____	DATE: _____

SECURITY & PICKUP INFORMATION: If anyone other than the parent/guardian signing this form is authorized to pick up your child---PLEASE leave a note at the front desk for that date.

EMERGENCY & MEDICAL INFORMATION: Please list any medical information that pertains to your child's health and well-being (be sure to include allergies, medications and special instructions)

Physician: _____ **Hospital preference** _____

Emergency Contact: _____ **Phone#** _____
(Someone--in addition to the parent-- who can be reached during the time your child is at the Life Center)

PARTICIPATION/PHOTO-VIDEO/PERMISSION & RELEASE

As the parent or guardian of the above child, I give my permission for my child to participate in the climbing center consisting of a 20' climbing wall and rope and all other activities provided at the Life Center. By signing below, the participant (or parent or guardian if participant is a minor) acknowledges and accepts the risks of physical injury associated with participation in the climbing center and other activities at the Life Center. Except for gross negligence on the part of the sponsor, the participant (or parent/guardian) accepts personal financial responsibility for any bodily or personal injury sustained during the activity. Further, the participant (or parent/guardian) promises to hold harmless the sponsoring organization and its representative for any injury related to the activity. If a dispute over this agreement or any claim for damages arises, the participant (parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process. ** I grant Lindenwood's staff the right to take any emergency steps needed on the behalf of the safety and well being of my child. ** I grant Lindenwood permission to use photographs, videos, and/or audio-tapes of my child for advertisements, displays, brochures and other promotions. ** I agree to pick up my child from the life Center for disciplinary reasons, illness or injury at the request of the director.

**** I understand that there is a late fee of \$1.00 per minute after the announced closing time.**
(10:30.m. for FNL, 6:30p.m. for School's Day Out).

Signature of Parent / Guardian _____
Date

NO Electronic devices, CD's, Tapes, Cell phones, Cameras, Computer games or Skateboards are to be brought to the Life Center. Confiscated items will be released to parents. Copies of the Lindenwood Disciplinary Policy are available at the front desk.