

Play Date Drop-in Child Care Center Travel Authorization form

1910 S. Glenburnie Road
New Bern, NC 28562
(252) 633-5557

610 B Airport Road
New Bern, NC 28562
(252) 633-5552

I, _____, hereby acknowledge that it is my desire for my child to participate in Bear City Play Date's after school program, after preschool program or various camps. By authorizing your child to participate in any of these programs, you are acknowledging that your child will be transported to and from local elementary schools, preschools and/or area attractions.

I am voluntarily allowing _____ to participate in Bear City Play Date's activities, including transportation by motor vehicle provided by Bear City Play Date, with the knowledge of the dangers inherently involved in the specified activities and motor vehicle transportation, and hereby accept any and all risks of injury, up to and including death, resulting from participation in activities and transportation provided by Bear City Play Date, LLC.

I hereby release Bear City Play Date's owners, staff members and respective insurance carriers of any and all liability for any injury or damage whatsoever arising from any participation in the Bear City Play Date programs, which includes transportation to and from local schools and area attractions.

I/we are the parent(s)/legal guardian(s) of the above participant, and hereby grant my/our permission for my child to ride the Bear City Play Date bus.

I hereby give permission to Bear City Play Date to take my child to a doctor or hospital if circumstances, in Bear City Play Date's opinion, warrant taking my child to a doctor or hospital for care, and hereby authorize the medical treatment of participant by a doctor or hospital, and I/we assume all responsibility for all resulting medical bills.

Parent's name (please print) _____

Parent's signature _____ Date _____

Medical insurance carrier & policy number: _____

Physician and phone number: _____

Emergency contact information: _____