

**Program Registration Form
(one per child)**

I hereby give my consent for my child _____ to participate in Stirling Library programming, under the careful supervision of library staff, as well as any student/parent volunteers.

Please complete the following, to be used in case of an emergency:

Child's Full Name: _____

Age: _____

Parent/Guardian's Full Name: _____

Contact Phone#: _____ Alternate Phone#: _____

Allergies/Medical conditions/Medication we should be aware of: _____

Information Release: Please cross out any you do not give authorization for.

- 1) I authorize Stirling Rawdon Public Library to use my child's name and/or artwork in library publications or other displays.
- 2) I give Stirling Rawdon Public Library permission to allow any news media to interview and/or publish photographs or audio/visual material of my child.
- 3) I give Stirling-Rawdon Public Library permission to post pictures that may include my child on their Facebook/Instagram pages and/or Stirling-Rawdon Public Library website.
- 4) I have read and understood Section 1e) of the Unattended Children Policy #OP294/10E which states 'Children under the age of 5 that are attending programs, may be briefly supervised by the library staff who may be running the program, however the child's caregiver must remain present within the Library building.'

Child's Name: _____

Parent/Guardian's Name and Signature: _____

Date: _____

*Please use back of form to indicate the program that your child is attending.

