VMFA YOUTH STUDIO PROGRAMS: EMERGENCY INFORMATION + PHOTO RELEASE FORM

SECTION 1: EMERGENCY INFORMATION

SECTION 1: EMERGENCY	INIONIATION			
Student's Full Name				
Prefers To Be Called			Date of Birth	
Gender	Female _	Male	Age	
Class # and Title*				
Parent/Guardian's Name			Street Address	
Cell			City	
Home			State and Zip Code	
Work			E-mail	
Alternate Contact Name			Street Address	
Cell			City	
Home			State and Zip Code	
Work			Relationship to Studen	t
Other Person(s) Authorize	d to Pick-up Student			
Name		Phone #		Relationship
Name		Phone #		Relationship
Name		Phone #		Relationship
Medical Conditions				
Allergies				
Current Medications				
Doctor's Name			Phone #	
Dentist's Name			Phone #	
Insurance Company			ID#	
Please list information or special needs that may help teachers while working with your child				
•	,	•		
Note: Students (under 13 yrs) must be picked up promptly at the end of class. Late departures may result in dismissal from the program. The authorized pick-up person should arrive before the completion of class and have a Photo ID ready for check-out. If the student is not picked up within 10 minutes, VMFA staff will attempt to contact the parent/guardian, followed by the alternate contact person and other person(s) authorized to pick-up. If VMFA staff cannot reach contacts within 30 minutes, the student will be escorted to security. An officer will contact the Richmond City Police Dept and they will determine the next course of action. Call 804.340.1438 for questions.				
Please read the following agreement carefully: I certify that the information I provided above is accurate. I have read the Youth				
Studio Programs Information Sheet and have reviewed the Studio Rules and Consequences with my child. My child is allowed to				
participate in all program activities. I will not hold the museum responsible for any accident or injury that may result during these				
activities. If notified of inju	ry or illness I will mak	ke immediate arra	ngements to pick up my ch	nild.
Parent/Guardian's Signature Date				
*A new form must be submitted at the beginning of each class. If your child is attending multiple classes, please make copies; remember to list of				
appropriate class and to sign and date each copy along with the Photo Release below.				
SECTION 2: VMFA PHOTO RELEASE FOR MINOR				
VMFA photographers frequently photograph events held at the museum to be used for the promotional material such as but not limited				
to brochures, advertisement of events, studio class announcements, website, etc. By signing, I agree to allow the Virginia Museum of Fine Arts unencumbered use of photographs taken of or that include my child.				
PARENT'S/LEGAL GUARDIAN'S NAME			CHILD'S NAME*	

DATE

SIGNATURE

^{*}Name of child / minor is never identified or notated in captions when photographs are used.