

**MCS Fun and Fitness Program Registration-Winter 20—If you have credits, deduct from total \$ owed**

Participant's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Relation \_\_\_\_\_

Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_ Work Phone if at work in the evening/or on weekends \_\_\_\_\_ Email \_\_\_\_\_

Can we text you with any program changes \_\_\_\_\_ Phone number we can text you \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone \_\_\_\_\_

**Medical Information**

Seizure Disorder (y/n) \_\_\_\_\_ Grand or Petite Mal? \_\_\_\_\_ Date of Last Seizure \_\_\_\_\_

Physical Limitations \_\_\_\_\_ hemophilia \_\_\_\_\_

Hearing Impairment (y/n) \_\_\_\_\_ Visual Impairment (y/n) \_\_\_\_\_ Heart Condition(explain) \_\_\_\_\_

\_\_\_\_\_ Asthma (y/n) \_\_\_\_\_ Inhaler \_\_\_\_\_

Diabetes (explain) \_\_\_\_\_

Allergies/Epi pen \_\_\_\_\_

AllergiesFood \_\_\_\_\_ AllergiesEnvironment \_\_\_\_\_

Allergies Medication \_\_\_\_\_

Assisted Devices \_\_\_\_\_

Medication if any-list below // Is participant self-medicating?

Name \_\_\_\_\_ For \_\_\_\_\_ Dosage \_\_\_\_\_ Time \_\_\_\_\_

Name \_\_\_\_\_ For \_\_\_\_\_ Dosage \_\_\_\_\_ Time \_\_\_\_\_

Primary Insurance Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_

Primary Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Is participant afraid of heights? \_\_\_\_\_ Swimming Ability \_\_\_\_\_

Can participant go out of state? \_\_\_\_\_

Behavioral issues \_\_\_\_\_ How should we handle them \_\_\_\_\_

Describe his/her behavior when not getting their way \_\_\_\_\_

Any other information staff should be aware of \_\_\_\_\_

Level of staffing if not 1:6 \_\_\_\_\_

Eat independently? \_\_\_\_\_ if no what kind of assistance is needed \_\_\_\_\_

Toilet independent? \_\_\_\_\_ if no what kind of assistance is needed \_\_\_\_\_

Photo release? I \_\_\_\_\_ give my permission for photos of my participant to be used for Facebook, promotion and advertising the Fun Fit program \_\_\_\_\_ signature