hackBCA V

Emergency Contact and Medical Information

(For students from the Bergen County Technical Schools district)

Section 1: Participant Information

Name : _____   Date of Birth: _____   Age: _____   Gender: _____

Home Address: _____

Section 2: Parent/Legal Guardian Personal Info

Parent/Legal Guardian #1

Name: _____

Home Address: _____   ☐ Same as Participant

Phone Number (for contacting during the hackathon): _____

Parent/Legal Guardian #2

Name: _____

Home Address: _____   ☐ Same as Participant

Phone Number (for contacting during the hackathon): _____

Section 3: Additional Emergency Contacts

In case of an emergency during the hackathon, hackBCA personnel will first attempt to contact the parent/legal guardians listed in Section 2. If unsuccessful, hackBCA personnel will then attempt to contact the additional emergency contacts listed below. Please provide information for two contacts.

Contact Name: _____   Relationship: _____

Phone Number (for contacting during the hackathon): _____

Contact Name: _____   Relationship: _____

Phone Number (for contacting during the hackathon): _____

Section 4: Medical Information

Name of Participant's Physician: _____ Phone Number: _____

Physical conditions, limitations, allergies, and/or special medical instructions:

_____

_____

Section 5: Medication

List ALL medication taken on a regular basis and that the participant will bring to the event. Medication should be given to a teacher/chaperone in the original prescription bottle with the proper labels from a registered pharmacist.

Name of Medicine	Time of Administration	Dose

Section 6: Leaving/Re-entering the Event

If a participant wishes to leave the hackathon prior to its conclusion, the participant must be signed out by a "pre-authorized" adult.

In addition to the parent/legal guardians and emergency contacts listed in Sections 2 and 3, the adults listed below may also sign the participant out of the event. Consider: Is your student planning to leave the event early with a friend's parent? If so, please authorize that adult to sign-out your student.

A state photo id will be required for signing a participant out of the event.

A participant may be signed back into the hackathon after being signed-out. (For example, a student may be signed out for an off-campus music rehearsal or to sleep at home for several hours prior to returning to the event.)

If no additional adults may sign-out your participant from the hackathon, write "None" below.

Name: _____ Relationship: _____
Name: _____ Relationship: _____
Name: _____ Relationship: _____

Signatures

_____   _____   _____
(Print Participant's Name)   (Participant's Signature*)   (Date)

*If Signatory Is a minor, Parent or guardian must also sign

_____   _____   _____
(Print Parent/Guardian's Name)   (Parent/Guardian's Signature)   (Date)