

**Watkins Glen Public Library
2022 Summer Learning Program
Parent/Guardian Consent Form**

I, _____, am the parent or legal guardian of

I give permission for him/her/them to participate in the Watkins Glen Public Library's 2022 Summer Learning Program.

Please **initial** the following if you give permission to:

_____ The library may use photos of the student on the website, social media accounts, and newsletters associated with the library when sharing information about programs and events.

_____ The student, if over the age of 8, may use the library's public computers and Internet.

_____ In the event of an emergency library staff may call 911, if necessary, before notifying the emergency contact.

Does the child have any allergies? If so, do they require medications or immediate treatment such as an EPI pen?

Emergency Contact Information

First Contact Name: _____

Relationship: _____ Phone Number: _____

Second Contact Name: _____

Relationship: _____ Phone Number: _____

Parent/Guardian Signature

Date