

## Talcott Mountain Science Center Medical form and Waivers

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

*Except as noted on this form, I believe that my child can successfully participate in mainstream group activities. I understand that effort will be made to contact me before emergency authorization or hospital treatment is given. In case of an emergency, I/We give permission to the physician selected by a Talcott administrator to hospitalize, secure proper treatment and to order injection, anesthesia or surgery for my child. I/We will be responsible for any and all costs of such medical treatment and if indicated have medical insurance to cover these costs.*

Medical Insurance company: \_\_\_\_\_

Insurance ID# \_\_\_\_\_

Name of medical insurance policy holder: \_\_\_\_\_

☞ Parent / Guardian signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

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**Primary contact** - who should we call in case of medical, behavioral, or pick-up concerns

Name: \_\_\_\_\_ Relation to student: \_\_\_\_\_

Cell phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Work phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

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**Secondary contact** - who should we call in case we cannot reach the primary contact

Name: \_\_\_\_\_ Relation to student: \_\_\_\_\_

Cell phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

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**Medical background** (Check all that apply)

Ear infection /abscess    Fainting    Motion Sickness    Heart Issues

Seizures    Diabetes    Asthma    Epilepsy

Allergies:  Bee stings    Penicillin    Food: \_\_\_\_\_

Other / Details: \_\_\_\_\_

Special Considerations: Does your child require any special treatment or consideration for any condition (i.e. learning disabilities, special needs, behavioral, hearing or vision issues, etc)?  Yes    No

If "Yes" please detail: \_\_\_\_\_

Does your child have a  504 plan    IEP    Paraprofessional   in place at school?

Will your child be taking any over-the-counter or prescription medications while they are at TMSC?  Yes    No

If "Yes", Please explain: \_\_\_\_\_

# TMSC Summer of STEM Adventures 2024

## Medication instructions

If your child will be taking or needs any medication during the hours of the summer program (this includes over-the-counter, inhalers, epi-pens, etc.), please print and fill out the following forms (at the end of this application)

**Medical Authorization form** (to be filled out by your child's physician)

**Medication drop-off form** (to be filled out by parent/guardian)

Any medication must be brought by a parent/guardian to the nurse's office at TMSC prior to the first day of your child's program. Medication must be in its original packaging with prescribing information intact. Please put the medication inside a clear ziploc-style bag, labeled clearly with your child's name, with the medical authorization form and medication drop-off form inside. Medications can be brought to the nurse (or main office) M-F between 8:30 and 4:30.

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## Photo waiver

I understand that photos and videos are taken regularly as part of the summer program and may be used in Talcott newsletters, literature, public materials and electronic media.

Accept       Decline my child to be included in photos / videos

⇒ **Parent / Guardian signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

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## Behavior contract

Talcott Mountain Science Center's Summer Program is dedicated to providing an enriching, educational, and safe environment for all participants.

For students attending our programs, we expect safe and respectful behavior. This includes safe and appropriate use of Talcott facilities, transportation (buses and vans), equipment, and networks. By participating in our programs, parents and students agree that participants will refrain from illegal, harmful, obscene, threatening or dangerous behavior. This includes bullying, physical or verbal abuse, fighting, roughhousing, unsafe or violent behavior, theft, inappropriate language, disobedience of staff, or leaving an activity without permission, and other such behaviors that impede the successful participation of students and staff.

For participants who exhibit inappropriate behaviors, Talcott staff will document them and discuss the incident(s) and consequences with the Talcott director(s) as appropriate. In the case of physical or otherwise endangering altercations, parents will be notified as soon as is reasonable during or after the day's activities.

Talcott reserves the right to remove a student from the program for on-campus supervised "time out", remove them for the remainder of the day, or if need be removed from the remainder of the program. In the case of removal, the parent is responsible to pick up their child as soon as they can. No refunds will be given for students removed from the program for behavior issues.

⇒ **Parent / Guardian signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_