



*LADY TROJAN Parents' Night Out*

*The Lady Trojan Basketball Players are babysitting!*

*November 4th 6:00 - 9:00pm @Parkland HS Gym*

*Cost: \$30 per child (ages 5 and up)*

*Games, crafts and a small snack are provided*

**Child's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Age:** \_\_\_\_\_

**Contact Phone #** \_\_\_\_\_

**(can be reached during event at this number)**

**Additional Child Name:** \_\_\_\_\_

**Age:** \_\_\_\_\_

**Waiver & Insurance Information**

I understand that I am financially responsible for any medical bills incurred by my child while at Parents' Night Out. I authorize the staff of the Lady Trojan Basketball Team to act as they deem it necessary in the event an emergency arises. I hereby release and forever discharge the staff of the Lady Trojan Basketball Team of and from all manner of actions, suits, damages, claims, and demands on account of personal injury or death arising from my child's participation in the Lady Trojan Parents' Night Out.

**PARENT SIGNATURE**

\_\_\_\_\_

**PRINT NAME**

\_\_\_\_\_

**DATE** \_\_\_\_\_

**HEALTH INSURANCE (circle one):    YES    NO**

**INSURANCE CO:** \_\_\_\_\_

**SUBSCRIBER'S NAME:** \_\_\_\_\_

**ALLERGIES:** \_\_\_\_\_

*WE KINDLY ASK THAT YOUR CHILD(REN) BE PICKED UP PROMPTLY AT 9 PM*

**PLEASE BRING BOTH PAGES OF THIS FORM AND A CHECK MADE PAYABLE TO: PARKLAND LADY TROJANS BOOSTER CLUB ON NOVEMBER 4th!**

*The Parkland School District does not sponsor or sanction this event.*