

To ensure the safety of your children when involved in the Hay Harbor Club or Fishers Island Yacht Club activities, we are asking parents or guardians to fill out the following form for **each child**. This form will be filed in the Hay Harbor office and will accompany the child on trips away from the Club. This form will be required to be on file for any junior participating in any event. Please return with your scheduling requests.

Emergency Medical Treatment Authorization

Name _____ Date of Birth _____

Parent/Guardian Name _____ Phone _____

Address _____

Emergency contacts:

1. Name _____ Phone _____

2. Name _____ Phone _____

Allergies, chronic illnesses, medical conditions, medication taken, or other pertinent information:

Family Doctor: _____ Phone _____

Last tetanus shot: ____/____/____

If the parent or guardian cannot be immediately reached in the event of injury or illness of the above named child, permission is hereby granted to the Fishers Island Yacht Club and the Hay Harbor Club and their employees to employ and authorize such methods of treatment, as in their judgment, may be necessary.

Signature _____ Date _____

Waiver and Indemnity Agreement

The parent or guardian agrees to indemnify the Fishers Island Yacht Club and the Hay Harbor Club and hold them harmless from any claim arising out of or in connection with any acts or omissions of the above child. The parent or guardian also agrees to hold the Fishers Island Yacht Club and the Hay Harbor Club harmless and to waive all claims arising out of or in connection with acts and omissions of their Directors, agents or employees connected with the above child's association with the Fishers Island Yacht Club and the Hay Harbor Club.

Signature _____ Date _____