

Wyoming County Community Fair  
Junior Fair Board Photo Release

Name: \_\_\_\_\_

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

\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

(if a minor)

I hereby grant my consent for use of my/my child's name, voice, photograph, image and /or likeness, by the Wyoming County Community Fair or an agency it designates for unlimited broadcast, re-broadcast, print and other reproduction for any media use related to the promotion of the Fair.

I further release the Fair Board or any media agency it designates from any responsibility for remuneration or consideration.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Parent/Guardian Signature (if a minor)

\_\_\_\_\_  
Date

## Junior Fair Board Medical Information

Name: \_\_\_\_\_

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

Parent/Guardian Name(s): \_\_\_\_\_

In case of emergency, we must be able to contact you. Please list a day/evening telephone number where you can be reached.

Father/Guardian-Day: (\_\_\_\_) \_\_\_\_\_ Evening:(\_\_\_\_) \_\_\_\_\_

Mother/Guardian-Day: (\_\_\_\_) \_\_\_\_\_ Evening:(\_\_\_\_) \_\_\_\_\_

Other emergency contact person:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
(grandparent, aunt, uncle, etc.)

Telephone: (\_\_\_\_) \_\_\_\_\_

Health/Accident Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Policy Holder: \_\_\_\_\_

Known Allergies: \_\_\_\_\_  
(food, drug, insects, etc.)

Special medical concerns, needs, or conditions we should know about:

\_\_\_\_\_  
(epilepsy, asthma, diabetes, injuries to bones/joints, etc.)

Medications currently taking: \_\_\_\_\_  
(dose and frequency)

Date of last tetanus booster: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

### Parental Consent Statement

I, the undersigned parent/guardian of \_\_\_\_\_, hereby give permission to physicians and attendant staff to perform emergency first aid for him/her as they deem necessary, and refer him/her to an off-site physician when deemed appropriate. It is understood that I will be contacted in case of an emergency. It is understood that the Fair Board of Directors will exercise reasonable caution in conducting or participating in the fair and related activities and I/we agree that they will not be held liable for any accident that may occur.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date