

**Greenwyche Club, Inc. 2010 Health Form**

Member's Full Name \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Work Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Work Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

Other Phone Numbers \_\_\_\_\_ Email Address(s) \_\_\_\_\_

In Case of Emergency Call (other than parent) \_\_\_\_\_

**CHILDREN'S INFORMATION**

1. Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Please list any medical problems, chronic illnesses, allergies, etc. \_\_\_\_\_

Date of last Tetanus shot \_\_\_\_\_

2. Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Please list any medical problems, chronic illnesses, allergies, etc. \_\_\_\_\_

Date of last Tetanus shot \_\_\_\_\_

3. Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Please list any medical problems, chronic illnesses, allergies, etc. \_\_\_\_\_

Date of last Tetanus shot \_\_\_\_\_

4. Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Please list any medical problems, chronic illnesses, allergies, etc. \_\_\_\_\_

Date of last Tetanus shot \_\_\_\_\_

*Please list additional information on back.*

**Release for Treatment at Huntsville Hospital**

I give permission for the staff of Greenwyche Club, Inc. to seek medical treatment for my child if he/she becomes injured or ill while at Greenwyche. I understand that my child will be taken by car or ambulance to Huntsville Hospital Emergency Room for appropriate treatment as directed by the emergency room physician.

Signed \_\_\_\_\_ Date \_\_\_\_\_

*Parent of Minor Child*

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My child(ren) \_\_\_\_\_

Age 8 or older is (are) capable of swimming the length of the pool and is (are) able to be left unaccompanied by a parent at the pool. I/We understand that the child(ren) understand and will abide by the rules of the pool as stated in the pool rules. I/we can be reached at these numbers (listed above.) We would like to make sure the parent realizes the responsibility of leaving their children at the pool. Your child(ren) must be competent swimmers to be left unattended.