

Progressive Agriculture Safety Day™ Registration
Thursday, June 24, 2010 from 9:00 a.m. - 3:30 p.m.
Registrations Due: June 18, 2010

Participant Name _____

Address _____

City _____ State _____ Zip _____

Gender _____ Age _____

Parent/ Guardian Name _____

Home Phone _____ Cell Phone _____

Phone number where you can be reached during safety day _____

Name of Additional Emergency Contact _____

Phone where emergency contact can be reached during safety day _____

Family Physician _____ Phone _____

My child is allergic to (include any food allergies as well): _____

My child may be given the following over-the-counter medications: _____

After safety day, the following people have permission to pick up my child:

The following people are **not** allowed to pick up my child at any time:

NOTE: If you are sending more than one child to safety day, please complete a separate form for each child.

Don't forget to complete and sign the Release and Consent Form on the back.