

So that we may better serve you and protect the safety of our students, please remember:

- Only children who are enrolled may attend the class.
- Enrollments are taken on a first-come, first-served basis.
- All fees must be paid when registering.
- Children dependent on another individual for transportation to and from class must be escorted to and from the classroom by the responsible adult. If the class is held outdoors, the child must be brought to the instructor's immediate area by the responsible adult.
- A parent, guardian or designated adult must pick the child up within 15 minutes of the scheduled end of the class.
- If the child has not been picked up within 15 minutes, the instructor will call the parent or guardian. If unable to contact the parent or guardian, the instructor will call the responsible adult designated by the parent or guardian.
- Refunds are based on percentage of attendance. Please see the back inside cover of this bulletin for additional information and/or contact the Office of Distance Education and Outreach.
- The ENMU Children's Release and Medical Consent Form (see below) must be completed before class begins for all children and teenagers under age 18 years.

ENMU Children's Release and Medical Consent Form

Please print:

Name of Class: _____

This form must be returned with your child(ren)'s class registration form and may be photocopied for additional children and classes.

I grant approval for my child

Name: First _____ Last _____ Age _____

to participate in the current child(ren)'s program and release Eastern New Mexico University and any instructors and assistants for any liability arising from my child(ren)'s participation in said programs. I understand the college does not provide health and medical insurance for participants. Consent is hereby given to ENMU children's class presenters and/or supervisors to seek or give medical aid as required in case of an emergency.

I give permission for my child(ren) to go on any field trips related to children's programs. **Yes** **No**

Parent/Guardian's Signature: _____ **Date:** _____

Parent's Name: _____ **Phone:** _____

Additional designated adult who may be contacted in case of emergency:

Name: _____ **Phone:** _____

Medical Doctor: _____ **Phone:** _____

Allergic to: _____

(See back inside cover for registration details.)