

Cops 'N Kids Reading Center, Inc.

800 Villa St. \* Racine, WI 53403

262-632-1606 \* [www.cops-n-kids.org](http://www.cops-n-kids.org)

Student Enrollment Form – All Programs 2022-2023

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

Date of Birth: \_\_\_\_\_

Student's Street Address: \_\_\_\_\_

Gender / Race / Ethnicity (Optional) \_\_\_\_\_

School, Grade & Teacher's Name: \_\_\_\_\_

Parent(s) or Guardian Contact: \_\_\_\_\_

Name & Relationship to Student: \_\_\_\_\_

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

Phone Number & Email: \_\_\_\_\_

Alternate Phone #: \_\_\_\_\_

Additional / Emergency Contact: \_\_\_\_\_

Name & Relationship to Student: \_\_\_\_\_

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

Phone Number & Email: \_\_\_\_\_

\_\_\_\_\_ The above individuals are authorized to take my child (the above-named student) from the Cops 'N Kids Reading Center. Please list any additional individuals who you authorize to take your child from the CNK Reading Center, and their contact information on the back.

\_\_\_\_\_ The following individuals are not authorized to take my child (the above-named student) from the CNK Reading Center: \_\_\_\_\_.

Does your child have any medical conditions (including food or medical allergies) that we need to understand? (Yes / No). If yes, please explain: \_\_\_\_\_

Permissions: I agree to the attached terms and conditions (including release of information, media release, hold harmless agreement, and field-trip permissions). I hereby authorize CNK to seek emergency medical care as needed for the above-named student, if needed. I understand that CNK does not provide medical insurance, and will not be liable for medical conditions, incidents, or ailments (including COVID infections) of my child.

Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Cops 'N Kids Reading Center, Inc.  
Terms and Conditions of Enrollment

MEDIA RELEASE:

I consent that my child may be photographed (by still or video camera) or interviewed while involved CNK programs for the promotion of the Cops 'N Kids Reading Center. This permission may include publication in social media (such as Facebook, Twitter, Instagram, etc.), print or video media (such as the Racine Journal Times, the Milwaukee Journal Sentinel, local or national television news, and YouTube channels). I understand that advertisement is for the benefit of the Cops 'N Kids Reading Center, and that neither my child nor I may receive compensation for such appearances, productions or publications. I give permission to the Cops 'N Kids Reading Center to use my child's name, age, voice, likeness (and / or other intellectual property rights) without compensation in any and all promotional materials. I understand that my child will not be engaged in any photograph or videotape or audiotape that will cause my child harm or that might be considered offensive. I also understand that CNK has limited control over the use of likenesses (etc.) once produced and / or published. I understand that these permissions are revocable, but that my child's name, voice, image, likeness, may not be feasibly withdrawn once the media materials are written, produced, or published.

RECORDS & INFORMATION RELEASE: I understand CNK may ask for additional information from me relating to my child, including school records. As a condition of my child's participation in CNK programs, I agree that I will provide any information reasonably requested.

FIELD TRIPS:

I consent that my child be allowed to go on walks or take Field Trips with staff and authorized volunteers of the Cops 'N Kids Reading Center. Trips by bus, van, car or foot are permitted. I understand that normal and reasonable precautions will be taken to ensure the health and safety of my child.

RULES and GUIDELINES:

I understand that my child must follow the rules and guidelines of the CNK, and that failure to follow such rules may result in termination of the child's ability to attend CNK programs.