

Chatmoss Country Club Pool  
Unaccompanied Child Information and Authorization  
Form

This form needs to be completed and on file for all children ages 10 - 16  
years old.  
One per child please.

Child's Photo

Child's Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Work Phone: \_\_\_\_\_

\_\_\_\_\_

Father's Name: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_ Work Phone: \_\_\_\_\_

\_\_\_\_\_

Contact in Case of Emergency: \_\_\_\_\_

\_\_\_\_\_

Contact Phone Numbers: \_\_\_\_\_

\_\_\_\_\_

Allergies to Medication: \_\_\_\_\_

\_\_\_\_\_

Medical Conditions: \_\_\_\_\_

\_\_\_\_\_

" I \_\_\_\_\_ authorize Chatmoss Country Club (the Club) and /or its agents and employees to provide emergency medical care to my minor child as needed. In addition, I hereby release and forever discharge the Club and its officers, directors, employees, and agents from any liability, claim, loss, damages, cost, or other expense; and waive any right to sue on any such claims arising directly or indirectly during said child's presence on Club property.

I have received and have read a copy of the rules for unaccompanied children at the Chatmoss Country Club Pool. I agree to abide by these rules and understand failure to do so may result in a loss of the unaccompanied privilege.

\_\_\_\_\_

Parent's Signature