



**Bluffdale City Youth Council  
Parental Permission, Medical Information & Photo/Video Release Form**

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**Youth's Full Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**School Attending:** \_\_\_\_\_

**Parent/Guardian Name (Print):** \_\_\_\_\_

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**1. Participation & Travel Permission**

I, \_\_\_\_\_, as the parent/guardian of the youth named above, hereby give permission for my child to participate in all activities and events sponsored by the Bluffdale City Youth Council.

I further authorize my child to travel with the Bluffdale City Youth Council, its staff, and designated volunteers to and from scheduled events, meetings, and activities, whether within or outside the city limits.

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**2. Medical Information**

- Does your child have any medical conditions or allergies?  Yes  No

If yes, please describe:

\_\_\_\_\_

- Is your child currently taking any medications?  Yes  No

If yes, please list:

\_\_\_\_\_

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**3. Emergency Contact Information**

**Primary Contact Name:** \_\_\_\_\_ Phone: \_\_\_\_\_

**Email:** \_\_\_\_\_

**Alternate Contact Name:** \_\_\_\_\_ Phone: \_\_\_\_\_

**Email:** \_\_\_\_\_

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#### **4. Release of Liability**

I release and hold harmless Bluffdale City, the Bluffdale City Youth Council, its officers, employees, and volunteers from all claims, demands, or causes of action that may arise from any injury to my child or damage to property during participation in or travel to/from any Bluffdale City Youth Council activities and events.

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#### **5. Photo & Video Release**

During Youth Council activities, photographs or video recordings of participants may be taken and used for promotional, educational, or informational purposes in printed materials, on the City's website, or on official social media platforms.

Please check one:

**YES** – I give permission for my child to be photographed/recorded and for the images to be used as described above.

**NO** – I do not give permission for my child to be photographed/recorded.

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#### **6. Code of Conduct Acknowledgement**

The Bluffdale City Youth Council has established a **Code of Conduct** to ensure a positive, respectful, and safe environment for all participants. By initialing below, both the youth participant and the parent/guardian acknowledge they have read, understand, and agree to follow the Bluffdale City Youth Council Code of Conduct.

**Youth Initials:** \_\_\_\_\_ **Parent/Guardian Initials:** \_\_\_\_\_

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#### **7. Signatures**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Youth Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

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**Please return this completed form to the Bluffdale City Youth Council Liaison.**