



# EVERGREEN PARK & RECREATION DISTRICT CHILD/YOUTH PROGRAMS APPLICATION 2019-2020

All sides of this form must be COMPLETED AND SIGNED before the child may attend.

## Evergreen Park & Recreation District

Program Information:  
Attn: Children's Programs  
1521 Bergen Parkway  
Evergreen, CO 80439  
720-880-1218  
Fax: 720-880-1280

### Statement of Physical Condition

Student's Name: \_\_\_\_\_ was given a physical

Examination within the last 12 months on: \_\_\_\_\_

Immunization records are up-to-date (Please attach record) Yes \_\_\_\_\_ No \_\_\_\_\_

Chronic medical Conditions: (List) \_\_\_\_\_

\_\_\_\_\_

Restrictions: (List) \_\_\_\_\_

\_\_\_\_\_

Allergies: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Cleared for age appropriate activities

\_\_\_\_\_ Cleared for preschool attendance.

\_\_\_\_\_ Date

\_\_\_\_\_ Physician Name (Print)

\_\_\_\_\_ Physician signature

\_\_\_\_\_ Address

\_\_\_\_\_ Phone

