

# Children's Choir OF CHICO

819 Sheridan Ave, Chico, CA 95926  
childrenschoir@pacbell.net  
(530) 342-2775

## BELLA VOCE EMERGENCY CONTACT INFORMATION 2007-2008

Choir Member: \_\_\_\_\_

Please list emergency contact information: (i.e. relative, neighbor)

Name	Relationship	Telephone
_____	_____	_____
_____	_____	_____
_____	_____	_____

In the case that my emergency contacts cannot be reached, I agree to permit the supervisor of this activity to authorize emergency medical treatment for me. Further, I understand that First Christian Church does not carry medical insurance on choir members.

In the event of an emergency, I would like to make aware the following medical conditions, or other information concerning myself (including food allergies, insect bites, etc.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I acknowledge that I understand the contents of this document.

Choir Member Signature \_\_\_\_\_ Date \_\_\_\_\_

***ALL FINAL PAPER WORK AND FIRST TUITION PAYMENT ARE DUE BY FRIDAY, AUGUST 31<sup>ST</sup>, 2007.***