



Youth Empowered Towards Independence 'About town' Program Consent Form

Yeti is about having

**Respect for yourself
Respect for others
And taking Responsibility for your
actions..**

**Can you handle that? If you can then you're
welcome to come....
if you can't let us know when you can....**

**By signing this form you take responsibility for
the information you have provided and agree to
show respect for yourself & others on Yeti
programs.**

Medical

**Do you have any medical condition that we need to know
about?**

Name: _____

**Are you using any medication, do you have Asthma, heart
conditions, epilepsy, fears, allergies etc**

Date of Birth: ___/___/'19

Emergency Contact:

(If something happens to you who do we call?)

Name: _____

Relationship: _____

Phone: _____

Your name: _____

Signature: _____ Date: ___/___/2008