



**Albuquerque Northeast
Lions Club
"Operation KidSight"**

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Registration and Consent for Eye Screening

Please Screen My Child I have read, and agree, with the information on this sheet and will provide all requested Follow up information.

↓Parent or Legal Guardian Signature ↓

Date: _____

Location: _____

Please Print All Information Legibly

M () F () Age: _____ Date of Birth: _____

Child's Name _____

Parent / Guardian Name _____

Mailing Address _____

City, State, Zip Code _____

Telephone Number _____ Cell Phone Number _____

Emergency contact number _____ Emergency CTC Name _____

Type of Insurance: Private (), Medicaid ? (), None ()
Has your child been previously seen by an eye Doctor ? Y () N ()

Does your child wear corrective lenses ? Y () N ()

African American () | Caucasian () | Hispanic () | Native American () | Other ()

The Albuquerque Northeast Lions Club. is giving a free vision screening test. Your child is eligible to have a state of the art digital image taken for evaluation to determine if your child should be tested further by the eye specialist of your choice.

The photo screening and evaluation may determine the presence of eye disorders including far and near sightedness, astigmatism, strabismus, anisometropia, exotropia, esotropia and media opacities (i.e. cataracts). Correction of vision disorders at an early age may greatly improve a child's ability to learn.

NO PHYSICAL CONTACT IS MADE WITH YOUR CHILDS EYES AND EYE DROPS ARE NOT NECESSARY.

By signing this form you give permission for your child, to participate in this screening event. You also agree that you understand and consent to the following:

- I, the parent or legal guardian, understand that I am responsible for arranging for a full eye exam with an eye care professional if I am informed that such an exam would be beneficial for my child by the Digital Image evaluation. I also agree that I will provide the required follow up medical information if further evaluation is indicated .
- The information obtained from this vision screening is to be considered a preliminary procedure only and does not constitute a diagnosis of or absence of vision problems. It should be utilized only as a part of a comprehensive eye care program which includes regular optometric / ophthalmological exams.
- The Albuquerque Northeast Lions Club. may keep the names of children screened and the date in order to provide follow up or to avoid unnecessary duplicate screening and may use a separate entity NMLOKS for follow up process. Follow up contact may include information on financial resources available to assist in obtaining eye care .
- The Albuquerque Northeast Lions Club. will not be held accountable for any errors of commission, omission or other misdiagnosis.

