



# Camp H2O ~ MEDICAL RELEASE FORM

I, \_\_\_\_\_, am the parent or guardian of \_\_\_\_\_.

I hereby consent that the above named minor has my permission to participate in the activities planned in conjunction with the Camp H2O leadership event. I hereby recognize that there may be risks involved with respect to the activities in this program. I hereby assume such risks, and release Anaconda Community Intervention, Inc. (ACI), its agents, employees, or students of any liability. I understand that in the event of a medical emergency, Camp H2O staff will make every attempt to contact me. If said attempts are not immediately successful, the Camp H2O staff may refer the above named minor to a licensed medical practitioner and/or clinic. I hereby consent that such physician, hospital, or clinic may treat the said minor in response to the medical emergency. I hereby release ACI, Inc., its agents, employees, or students of responsibility for the above named minor in the event that the minor does not follow prescribed treatment for injury/illness.

\_\_\_\_\_  
 Parent/Guardian's Signature Date

Phone Numbers (Cell) \_\_\_\_\_ (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Emergency Contacts:

Name	Relationship	Phone Number(s)
_____	_____	_____
_____	_____	_____

## Student Medical History and Information:

Do you have Medical Insurance?  Yes  No Medical Provider \_\_\_\_\_

Medications (please list, name and dosage) \_\_\_\_\_  
 \_\_\_\_\_

What, if any, are your child's allergies (foods, insects, medications)? \_\_\_\_\_  
 \_\_\_\_\_

Conditions or Disabilities (please list and explain) Does your student have any physical, learning, emotional, or other conditions or disabilities which could interfere with his/her academic, cultural or physical education (i.e. ADD/ADHD, asthma, autism, diabetes, wheelchair bound, etc.)?  
 \_\_\_\_\_  
 \_\_\_\_\_

## Camp H2O ~ MEDIA RELEASE

I give my permission for Camp H2O staff, ACI, Inc., its agents, employees, or students to take photos of the activities in which the above mentioned minor may be participating. Please note that program photos may be used in ACI, Inc. promotional materials (i.e. brochures, newsletters, press releases, slide shows, videos, and Facebook page).

\_\_\_\_\_  
 Camp Participant Signature Date

\_\_\_\_\_  
 Parent/Guardian's Signature Date