

Troop M Camp Cadet, Inc.
Parental Permission and Responsibility

I/we understand that The Troop M Camp Cadet, Inc. has accepted my child to attend camp at the Orefield Camp Fowler Location during the week of June 11, 2017 through June 16, 2017 (hereinafter referred to as "camp"). By signing this document, I/we agree to assume all risks arising out of his or her participation in this camp. I/we the parent(s) or legal guardian of _____ (hereinafter referred to as "child"), consent to my child's participation in this unique camping program and assume all risk and all claims for damages of any nature, which my child could receive by reason of accident or injury while attending this camp.

I/we hereby waive any claim against The Troop M Camp Cadet, Inc., the Commonwealth of Pennsylvania, the Pennsylvania State Police, and/or their insurance carriers for any damages or injury, real or personal, sustained while engaged in activities while attending camp and using the facilities owned by the Commonwealth of Pennsylvania and the Pennsylvania State Police.

The camp nurse, physician or local hospital has my permission to treat the above named child in the event of an emergency. In the event of an emergency, I may be reached at the following telephone numbers:

Home: (____) _____ ; Work: (____) _____ Cell: (____) _____

I have supplied camp staff with alternate emergency numbers if I cannot be contacted.

I/we are in agreement with the rules and policies of the camp and are anxious for my child to be influenced by them. I/we will talk with my child prior to camp and encourage him/her to take part in all activities and to cooperate with camp staff at all times. I/we understand that events such as hikes, field trips, and other activities are planned away from the camp grounds. The activities will be under the direction of the Camp staff and are part of the camp program. My child has permission to participate in all such trips and media photo opportunities.

I/we also understand that if my child's behavior violates any of the camp rules or intimidate any other camper, administrator or counselor, camp staff has the right to discipline or dismiss my child from the program at their discretion. It would then be my responsibility to provide prompt transportation from the camp for my child.

Having read and understood the information above, I/we acknowledge our intention to be bound by this agreement:

Parent/Guardian:

Parent/Guardian:

Name

Name

Address

Address

_(_____)_____

_(_____)_____

Home Phone

Home Phone #

Work Phone

Work Phone

Signature

Signature

Date

Date

AFFIDAVIT

COMMONWEALTH OF PENNSYLVANIA

:

SS

COUNTY OF

:

On this, the ____ day of _____, 2017 before me. A notary Public, the undersigned officer, personally appeared _____ and _____, known to me (or satisfactorily proven) to be the person (s) whose name (s) is/are subscribed to the within Parental Permission and Responsibility, and acknowledge that he/she executed the same for the purposes therein contained.

IN THE WITNESS WHEREOF, I hereunto set my hand and official Seal.

Notary Public
My Commission Expires: