



General Camp Application

School Site: _____ Camp: _____

Camp Week(s): _____ Dates: _____

Days Requesting: Monday Tuesday Wednesday Thursday Friday

Monday Tuesday Wednesday Thursday Friday

*Camp payments are due on or before service.

*All Outstanding balances must be paid before attending camp

Student Information

Student Name: _____

Boy Girl Grade: _____ Birth Date: __/__/____ Age: _____

Parent/Guardian(s) Name: _____

Address: _____

Mom Phone: (____) _____ - _____ Dad Phone: (____) _____ - _____ E-mail: _____

Medical Information: _____

(Medical conditions, Allergies, Special Needs. Please list all medications)

Emergency Contacts:

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

Photo/Video Release:

I _____ the parent/guardian of _____ hereby authorize and consent to the use of his/her visual image for the appropriate purposes, including but not limited to: photography, videotape, electronic and print publications as well as websites. The purpose of such rights is for promoting the program, both in print and on the internet and waive any rights to compensation or ownership thereto.

Liability/Waiver Agreement

As the parent or legal guardian of _____, I hereby give my consent for his/her participation in **BASE Camp at Palmquist Elementary School**. I am aware that this camp is separate from OUSD and assume risks of damage, or injury that may be sustained while participating in this activity. I therefore, release any and all rights or claims for damages against BASE Programs, and all individuals assisting in instruction, or conducting these activities.

Parent Signature: _____ Date: _____