CROWN POINT
Ecology Center
renewing earth and spirit since 1989

PERMISSION, HEALTH AND MEDIA FORM
for
The Summer Farm & Science Camp 2010

Please Print
Participant Information **Date of Session_____**

Name of Child _____ Birth Date _____Gender M/F __
Parent/Guardian Name _____
Address _____ City _____ State _____ Zip _____
Phone - *Day* _____ *Cell* _____ *Evening* _____
Secondary Emergency Contact: _____ Phone *(day)* _____

I do hereby grant my permission for the above named child to participate in The Summer Farm & Science Camp at Crown Point the summer of 2010. I assume all risks in connection with the program and release the board and staff at Crown Point, the Sisters of St. Dominic and all volunteers thereof from all liability. My child will follow the rules of Crown Point and directions of program leaders.

_____ _____
Signature of Parent/Guardian Date

Health Information
Name of Parent/Guardian carrying Health Insurance _____
SS# _____ Insurance Company_____
Policy Number _____ and Group Number_____
Allergies _____
_____

Special Health issues and/or physical limitations _____
_____
Current Medications, if any _____

I hereby give permission to the medical personnel selected by Crown Point to order x-rays, routine tests and necessary transportation for my child. In the event I cannot be reached in an emergency I hereby give permission to the physician selected by the Crown Point staff to secure and administer treatment including hospitalization for my child as named above.

_____ _____
Signature of Parent/Guardian Date

Photo/Media Consent

I do hereby give permission to use photographs and statements made by my child for Crown Point publicity and program promotions unless otherwise noted.

_____ _____
Signature of Parent/Guardian Date

Please tell us how you heard of the Summer Farm & Science School (Check all that apply):
__ Posted flyer (Location:_____) ___ Interconnections Newsletter
__ Information Table at Event (Location: _____) ___ Returning Student
___ Website __ Word of Mouth(Name For Referral Discount)_____

Child's T-Shirt Size (Please Circle)
Small ***Medium*** ***Large*** ***X-Large***

Revised 02.22.10