

Dave Clouds karate Day Camp

Emergency contact form

Each camp participant must have this form submitted for each session before registration can be accepted.

Information is used for emergency purposes only

Childs Name: _____ age ____ DOB ____/____/____ Male ____ Female ____

Address: _____ Zip ____ home phone() ____ - ____

Mothers Name _____ cell phone _____

E-mail _____ Work Phone _____

Fathers Name _____ Cell phone _____

E-mail _____ Work Phone _____

Emergency Contacts: The parent or guardian listed above is the primary contacts. (Please list two additional contacts)

1. Name _____ Relationship _____ Phone (____) ____ - ____

2. Name _____ Relationship _____ Phone (____) ____ - ____

Additional persons authorized to pick up my child from camp:

1. Name _____ Relationship _____ Phone (____) ____ - ____

2. Name _____ Relationship _____ Phone (____) ____ - ____

Health Information

Please list any allergies or food restrictions:

Please indicate if your child has any medical/educational diagnosis

Seizure Disorder ____ Ear infections(s)/tube ____ Diabetes ____ Convulsions ____ Insects sting Allergy/Sensitivity ____

Penicillin Allergy ____ Asthma ____ EADD/ADHD ____ Other _____

Does your child need assistance to participate in this camp? Yes

____ No ____ Please list any prescriptions and/or medications your child is

taking. _____

Please list any remarks and /or recommended precautions for your child.

AUTHORIZATION FOR EMERGENCY CARE

I understand that I will be notified at once in case of accident or illness to my child and I will make arrangements for medical care of my child with the physicians or hospital of my choice if I cannot be reached to make necessary arrangements or in a critical emergency requiring medical treatment I hereby authorize Sensei Dave Cloud to contact the nearest emergency medical services (EMS) to transport to an emergency care facility. I understand that emergency personnel may choose to contact my child’s physician:

Dr. _____ Phone () _____ - _____

Parent Signature _____ Date _____

Sunscreen Permission

Sensei Cloud or his staff is prohibited from applying sunscreen to children without a parent’s or doctor’s approval. Therefore, without your permission, camp instructors will not apply sunscreen to your child. Please apply waterproof sunscreen to your child before camp. If you have a preferred sunscreen, please send it with your child, as the staff will remind children to apply sunscreen to their selves throughout the day.

I authorize the staff to provide and apply sunscreen to my child Yes _____ No _____

Parent Signature _____ Date ____/____/____

WAIVER AND RELEASE OF LIABILITY

My family and I hereby waive and release Dave Clouds karate dojo, the dojo and staff and their representatives from claims for damages and /or injuries incurred while participating in or as a spectator of this day camp. This includes while in a motor vehicle going to and from the Olivette Community Center. I have read and understand the registration policy. I also understand that there will be no refund if for some reason the child is absent from class for whatever reason. The camp is for three hours only. If the child is not picked up on time there will be a late fee of 20.00. Registration is invalid without signature. I also agree, as a participant or a parent of a minor participant, to grant full permission to Dave Clouds karate dojo to use my name, photographs, videotape or recording for promotional purpose without obligation or liability to me or my family.

Name of person Registering Participants Street Address and Zip Code

Signature of Person Registering Participants Day Phone

Sensei Dave Clouds Karate Day Camp and the Dojo

There will a day camp offered the following dates.

June 15 - June 29th 2018 limited enrollment of 7 students-no exceptions

July 9th - July 13th, 2018 limited enrollment of 7 students-no exceptions

The cost of the camp will be \$110.00 for the week. We do not take credit cards and your fee must be paid in advance along with your registration. The students must bring their snacks and their lunch. On Friday there will be pizza for those that can eat cheese. If your child cannot eat cheese then they must bring what they can eat. I am looking forward to helping your child grow and have fun during this experience. This is a limited time offer as the slots will fill up fast so get your name in and a confirmation to assure your child can be part of this experience.

Respectfully

Sensei Dave Cloud