

Summer Camp Parent/Guardian Permission Form 2023

Name of Student Participant: _____

Parent/Guardian: Please read this information carefully and sign at the bottom of the next page.

- I authorize my child/ward to attend: _____
Name of Camp (known hereafter as the camp/program)
- I understand that my child/ward is to accept and follow all rules and requirements governing conduct during the summer camp/program. It is understood that any student determined to be in violation or unfulfilling any of the program's behavior standards will be sent home at parents/guardians' expense.
- My child/ward is physically and emotionally able to fully participate in a summer camp/program.
- I recognize that participation in summer camp/program activities, even when well supervised and managed, poses an inherent risk to my child/ward, and I agree to assume such risk on behalf of my child/ward.
- I understand and have knowledge of the activities and the inherent risks associated with those activities in which my child/ward will participate. These activities may include, but are not limited to walking, running, hiking, high ropes courses, swimming, canoeing, field trips, and art/craft projects.
- I, individually, and on behalf of my heirs, successors, assigns and personal representatives, hereby release and forever discharge the camp or program, the Minnesota Office of Higher Education, the State of Minnesota and its employees, agents, officers, trustees and representatives (in their official and individual capacities) and any of the participating agencies, businesses, or organizations from any and all liability whatsoever for any and all damages, losses or injuries (including death) sustained by my child/ward or property or both, including but not limited to any claims, demands, actions, causes of actions, judgments, damages, expenses and costs, including attorney fees, which arise out of, result from, occur during, or are connected in any manner with my child/ward's participation in these camps/programs.
- I, individually, and on behalf of my heirs, successors, assigns and personal representatives, hereby agree to indemnify, defend and hold harmless the camp or program, the Minnesota Office of Higher Education, the State of Minnesota and its employees, agents, officers, trustees and representatives (in their official and individual capacities) and any of the participating agencies, businesses, or organizations from any and all liability, loss damages or expense, including attorney fees, that they or any of them incur or sustain as a result of any claims, demands, actions, causes of action, damages, judgments, costs or expenses, including attorney fees, which arise out of, occur during, or are in any way connected with my child/ward's participation in these camps/programs.

- I authorize the camp or program to administer reasonable first aid and/or obtain whatever medical treatment they deem necessary for the welfare of my child/ward. I agree I will be financially responsible for all charges and fees incurred in the rendering of said treatment. I agree to the release of any records necessary for treatment, referral, billing, or insurance purposes.
- I understand that the camp or program reserves the right to dismiss participants due to inappropriate behavior that could lead to the physical or emotional harm of themselves and/or others, or due to behavior contributing to the continued disruption of activities.
- I authorize the parents/guardian(s) listed in the camp application, as well as the emergency contact(s) listed, to pick up my child/ward at camp at any time.
- I authorize Get Ready staff to contact me or/and my child using personal information to inform me about the camp requirements, transportation, and attendance.
- I hereby release all pictures or videos of my child/ward taken by the camp or program and/or the Get Ready/GEAR UP Program/Minnesota Office of Higher Education for promotional purposes and programming materials, for example but not limited to, pamphlets, newsletters, videos, etc.
- I have read and understand the following data practices notice:

Tennessee Warning:

In accordance with the Minnesota Government Data Practices Act, the Minnesota Office of Higher Education (OHE) is required to inform you of your rights as they pertain to the private information collected from you/your child/ward.. When your child/ward register to receive a Get Ready/GEAR UP Summer Scholarship, the following information is collected: student name, student birthdate, student ID, student email address, student cell phone number, student grade, school, home address, home phone number, parent/guardian(s) name, relation and contact information, camp choice, and child/ward's grade point average.

OHE Get Ready/GEAR UP collects this information on students who wish to receive a Get Ready/GEAR UP Summer Scholarship to assist in the completion of summer academic enrichment opportunity applications and potential summer academic camp programming, and to evaluate and report on activities funded by Get Ready/GEAR UP. This data will be used by OHE Get Ready/GEAR UP staff to follow up with students on progress and their experience. You/your child/ward are not required to provide this information and may contact the Get Ready/GEAR UP Pathways Coordinator at your school to receive camp information without registering, however your child/ward will not be eligible for a Summer Scholarship for Get Ready/Gear Up. Information you provide is available to you and your child/ward, school staff, OHE Get Ready/GEAR UP employees, agents, and contractors, the legislative auditor, and upon court order.



Parent/Guardian Name-Signed: _____ Date: _____

Parent/Guardian Name-Printed: _____

Student Name: _____

Email Address:

Phone Number:

Note: Depending on the camp your student attends, you may need to fill out some additional information that is specific to the camp. Please follow up with the Camp for these forms.