

Spirit Camp
Emergency Information

Camper Information:

Last Name: _____ First Name: _____
Home Address: _____ City: _____ St: _____ Zip: _____
Email Address: _____

Emergency Contact: (indicate by * what number/which parent to contact first during Spirit Camp hours)

Mother's Name: _____ Employer: _____
Home Phone: _____ Work Phone: _____ Cell Phone: _____

Father's Name: _____ Employer: _____
Home Phone: _____ Work Phone: _____ Cell Phone: _____

Are there any allergies or any medical condition we should be aware of? If yes, please explain.

In case of medical emergency, I understand every attempt will be made to contact the parents or guardians. If we cannot be reached, I hereby give my permission to the physician selected by the Camp Representative to hospitalize and secure medical treatment for my child. I agree to accept responsibility for any associated medical bills.

Insurance Company: _____ Policy Number: _____

*** Signature of Parent/Guardian:** _____ **Date:** _____

Parental Consent and Liability Waiver Form

I _____ (print parent/legal guardian full name) understand that I am giving permission for my son/daughter, _____ to participate in Spirit Camp at the University of Maine from June 27-29, 2016.

Names of people who can pick my child up from camp: _____

I understand that cheerleading requires my child to be in excellent physical condition and that the activities, which he/she will participate in, can be strenuous and require athletic agility. I understand that cheerleading is an activity which involves a risk of injury. I agree to hold harmless Tami Campbell, the University of Maine Cheerleaders, or the University of Maine for any injury as a result of my daughter's/son's participation in Spirit Camp.

I also represent to you that to the best of my knowledge and belief, my son/daughter has no physical, medical or mental disability or other limitation that would restrict his/her ability to fully participate in this activity.

I give the right and permission to film, photograph or videotape my son/daughter for the use in any form of advertisement for Spirit Camp promotional purposes.

I agree to, and by the signing of this agreement, understand that there are certain inherent dangers related to cheerleading participation and therefore, agree to hold the University of Maine, Tami Campbell, the University of Maine Cheerleaders and the camp employees harmless and specifically agree not to make any claim against the Spirit Camp at the University of Maine for any injuries which would be considered to be a normal risk associated with participation in cheerleading activity.

*** Signature of Parent/Guardian:** _____ **Date:** _____