



Camper's Name: _____
Camp: _____
Camp Dates: _____
Address: _____
City: _____ Prov: _____ ZIP: _____

PARENTAL PERMISSION FORM

AGREEMENT TO PARTICIPATE

Camping is a vigorous, energetic experience. Participants need to be physically capable of carrying out camp activities. Activities can include walking up to one mile, running and exploring along bush trails and creeks, water sports, games of strength, rigorous field and group games, high ropes course, zipline, using sharp craft tools, horseback riding at various gaits on the trail and in the ring, using bow and arrow, throwing axes, using playground equipment, hiking in mountainous terrain, playing paintball and laser tag, lake canoeing, whitewater rafting, power tubing, skating, going on hayrides, tobogganing/sledding, tubing, and travelling to and from activity sites in a vehicle. I/we, the undersigned, recognize that there are risks of injury and/or loss associated with such a camping program. Camp Caroline staff make the safety and well-being of each camp and participant a top priority, however, the possibility exists that injuries and/or loss could occur. Injuries and/or loss can range from minor cuts and abrasions to sprained joints, bee stings, animal attacks, major cuts, concussions, broken bones, and even death. With many people together in close proximity it is also possible for illness to transfer from one participant to another, which can include, but is not limited to, colds, flu, strep throat, and chicken pox. Should a participant become sick with a highly contagious illness, he/she will be separated from other campers and sent home.

EXPECTATIONS OF THE PARTICIPANT CAMPER

Participants are expected to listen carefully and to obey the rules given at the beginning of the camp session and at each activity session by the person(s) in charge, as well as to assist by calling attention to situations which may cause injury for oneself and other participants.

ASSUMPTION OF RESPONSIBILITY

I/we, the undersigned parent(s)/guardian(s), assume the responsibility for injuries to my/our child/children in my/our care while at Camp Caroline, and I/we will not bring an action for damages which might arise from these injuries.

MEDICAL PERMISSION & RELEASE

I/we have read Camp Caroline's current Stock Medications List (linked below) and give permission for the Camp Nurse to administer as needed the medications listed therein at the dosages listed therein (according to the instructions on the packaging), unless directed otherwise in the camper's written medical information supplied by their parent(s)/guardian(s) on their registration form or on day of arrival. I/we also give permission to the Camp Director and/or Camp Nurse to approve and obtain medical attention necessary to the camper's welfare and good health. If such a situation were to occur, the camp will attempt to notify the parent(s)/guardian(s) or other emergency contact(s) as soon as possible. In the case of accident or illness, the participant must pay for any emergency transport and hospital/physician/medical expenses.

I/We will not send our camper to Camp Caroline if anyone in our household shows signs of any contagious illness (vomiting, diarrhea, chickenpox/measles/rash, pink eye, cough, fever, runny nose, sore throat, or shortness of breath, etc.) not related to a known, non-contagious, pre-existing condition.

I/we, the undersigned parent(s)/guardian(s) of the registering camper, acknowledge that I/we have read and understood the above Medical Permission, Release, and Commitment.

PHOTO/VIDEO RELEASE

I/we also give Camp Caroline permission to use pictures and/or videos that may be taken of the camper during the camp week for promotional purposes.

EMAIL & SOCIAL MEDIA PERMISSION

We would like your permission to stay connected with your Lead camper. Our Director of Lead and his team would like permission to email, text, or use social media to connect with your Lead camper regarding Lead camps, events, and other volunteer opportunities; as well as to respond to any inquiries and correspondence they may send. (Your camper can let us know they no longer want to be contacted about these opportunities at any time.)

I/we, the undersigned parent(s)/guardian(s), give permission for Camp Caroline Lead staff and volunteers to correspond with my Lead camper regarding Lead camps, events, and volunteer opportunities as well as respond to any inquiries and correspondence my camper may send.

Lead Email: _____

PARENTAL PERMISSION

I/we, the undersigned parent(s)/guardian(s) of the registering camper, acknowledge that I/we have read the above paragraphs, have completed the registration form and medical information fully and truthfully, and give permission for the registering camper to participate in their camp week at Camp Caroline.

Parent(s)/Guardian(s) Signature: _____ Date: _____

Parent(s)/Guardian(s) Printed Name: _____

Stock Medications List

(revised November 22, 2018)

Dear Parents: In order to keep you well-informed about our healthcare procedures, this list is provided for your information. In signing the Parental Permission Form (p.1), you acknowledge that you have read this list and grant permission to Camp Caroline's staff to follow these guidelines when administering "over-the-counter" medications according to your camper's needs.

Parental Permission Form can be signed and sent back without this list attached.

Purpose / Use	Name of Medication	Recommended Dosage
Fever and Pain	Acetaminophen (Tylenol)	Per package directions
	Acetaminophen (Tylenol) Junior Chews	Per package directions
	Acetaminophen (Tylenol) Suspension	Per package directions
Fever and Pain	Ibuprofen (Advil)	Per package directions
	Ibuprofen (Advil) Junior (tabs and liquid)	Per package directions
Allergy	Cetirizine (Zyrtec)	Per package directions
	Diphenhydramine HCl (Benadryl)	Per package directions
	Diphenhydramine HCl Junior Chews (Benadryl Junior Chews)	Per package directions
	Diphenhydramine HCl Liquid (Benadryl Liquid)	Per package directions
Heartburn, upset stomach, nausea	Bismuth Subsalicylate Liquid (Pepto Bismol)	Per package directions
Diarrhea Relief	Dextrose Monohydrate (Gastrolyte Rehydration Salts)	Per package directions
Heartburn	Calcium Carbonate (Tums)	1 tab as required
Sore Throat	Cepacol Sore Throat Lozenges (Benzocaine, Menthol)	Per package directions
	Strepsils Sore Throat Lozenges (2,4-Dichlorobenzyl Alcohol, Amylmetacrest B.P.)	Per package directions
	Halls Lozenges (Menthol)	Per package directions
Colds	Dextromethorphan Hydrobromide, Phenylephrine Hydrochloride, Acetaminophen (Dayquil)	Per package directions
	Dextromethorphan Hydrobromide, Doxylamine Succinate, Pseudoephedrine HCl, Acetaminophen (Nyquil)	Per package directions
	Vitamin C	1 tab as required
Bites, stings, burns	Diphenhydramine Hydrochloride (Benadryl Cream)	Per package directions
Antibiotic cream for minor nicks, scratches, cuts	Bacitran Zinc & Polymyxin B Sulfate Ointment (Polysporin)	As required

I/we have read Camp Caroline's current Stock Medications List and give permission for the Camp to administer as needed the medications listed therein at dosages listed therein (i.e. according to the instructions on the packaging), unless directed otherwise in the camper's written medical information supplied by parents at registration or on the day of arrival.

