



# Permission and Release Form SigmaCamp 2014

**Name of Camper**

\_\_\_\_\_

LAST

FIRST

Home Address \_\_\_\_\_

STREET

CITY

STATE ZIP

Phone \_\_\_\_\_

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_,

- hereby give my permission to employees of Sigma Camp to use any photos or videotape material taken of my child in Sigma Camp for educational, promotional, advertising use. The photos and videotape material will only be used by Sigma Camp.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- hereby give my permission to my child to participate in Physics, Chemistry and other labs in Sigma Camp.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- give my permission for my child to be transported in a motor vehicle provided by Sigma Camp.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_,

understand that my child's participation in Sigma Camp and its activities is completely voluntary. I recognize that certain hazards and dangers are inherent in Sigma Camp events and programs, particularly but not limited to sports events, labs and trips. I further recognize and have instructed my child in the importance of knowing and obeying the camp's rules and procedures for the safety of camp participants. I hereby release Sigma Camp, its directors, volunteers and employees from and against all claims or causes of action or demands, liabilities, damages on account of any injury or accident involving the child's participation in any of the camp activities.

**Signature of parent/guardian:** \_\_\_\_\_

**Printed name:** \_\_\_\_\_

**Date:** \_\_\_\_\_