



**REF. PROCEDURE: Rule 117.2, 117.3, 127.1**

## CAMPER REGISTRATION AND CONSENT RECORD

**This form MUST be signed by the parents, parent or legal guardian of any child participating in any camping activity at Camp Dainava. This includes camps sponsored by the "Lithuanian Catholic Federation Ateitis", "Lithuanian Scout Association" and others. \*\*\*Indicates information that must be provided.**

Camper's Name(Last)	First	Middle	Sex	Date of Birth
Address(Number and Street)	City	State	Zip	Telephone(Home)
Authorized Person's Name(Last)	First	Middle		Telephone(Home)
Address(Number and Street)	City	State	Zip	Telephone(Work)
Medical Insurance Co.				<i>Date of Arrival***</i>
Insurance Policy and Subscriber No.				<i>Date of Departure***</i>

Persons other than authorized person to be notified in an Emergency

Name: _____	Telephone Number: _____
Name: _____	Telephone Number: _____

Names of persons other than authorized person to whom camper may be released:

Name: _____
Name: _____

Camper's special needs, limitations, and required adaptations:

We(I) hereby grant permission for our(my) child or children named above to fully participate in the programs provided at Camp Dainava. We(I) understand, agree and acknowledge that Camp Dainava, and any sponsoring organization and/or their respective directors, officers, employees or volunteers cannot assume any responsibility for an injury, damage or harm which might result during the course of any activity during the camp or traveling to or from such activity and shall not be liable for any claim or lawsuit arising out of any such injury, damage or harm.

In consideration of permitting our(my) child to participate in any organized camp, we(I) agree that such responsibility for our(my) child will remain with us(me), as the parents, parent, or guardian of our(my) child. Should any claim be asserted by any person as the result of the acts of our(my) child while participating in any activity during camp activities or traveling to or from such activity or should our(my) child assert any claim or lawsuit against any organization, Camp Dainava or any sponsoring organization and/or their respective directors, officers, employees or volunteers, we(I) agree to indemnify and hold any sponsoring organization, Camp Dainava and their respective directors, officers, employees and volunteers harmless from any such claim or lawsuit, including attorney's fees and costs incurred in defense thereof.

We(I) further authorize medical treatment of our(my) child, in the event of illness or injury sustained in our(my) absence while our(my) child is participating in the activities at Camp Dainava.

<b>Signature of parent(s) or legal guardian</b>		
Signature: _____	E-Mail Address: _____	Date: _____
Signature: _____	E-Mail Address: _____	Date: _____