

Enviro Camp 2017 Registration Form

Camper's full name _____ Email address _____

Mailing address _____

Home phone: _____ Alternative phone: _____

Date of birth _____ Age _____ Gender _____ Grade (fall 2017) _____

Parent/Guardian Information

Name: _____ Name _____

Relationship to camper: _____ Relationship to camper: _____

Day phone: _____ Day phone: _____

Alternate/Cell phone: _____ Alternate/Cell phone: _____

Email address: _____ Email address: _____

Emergency contact: _____ Relationship _____ Emergency # _____

The cost for Enviro Camp is by donation (suggested minimum \$5 per session). Please make checks out to Michael Siptroth, write: "Enviro Camp" on memo, give to Michael or mail to: 2160 E Trails End Dr., Belfair, WA 98528 Thank you for your support!

I give permission for my child to be photographed and/or audio/video-taped during this event and understand that images, statements and/or recordings could be published, reproduced or distributed by the Salmon Center, Mr. Siptroth and their affiliates in all outlets, including but not limited to television, newspapers, internet, recruitment materials, and ads. I provide this consent without liability or claims to the Salmon Center, Mr. Siptroth, and/or their affiliates.

I accept responsibility for any potential risks and related outcomes during Enviro Camp activities and release and agree to indemnify the Pacific Northwest Salmon Center, Mr. Siptroth, and affiliates from any and all liabilities incident to participation in the 2017 Enviro Camp.

In case of an emergency, I hereby request and authorize the nearest urgent care, hospital, physician, and/or health care provider to provide medical treatment or transportation, if I can not be immediately contacted and informed. I have read the above statements and understand the information and agree to allow my child to participate in Enviro Camp and related activities.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Name (printed) _____