

Section 1: Camper Information

Student Name _____ Parent Name(s) _____

Mailing Address _____

City _____ State _____ Zip _____ Email (parent) _____

Home Phone (____) _____ Cell (____) _____

Age: _____ Grade: 6 7 8 School _____

Dietary restriction if any: _____ T-shirt size Youth: XS S M L XL

Adult: XS S M L XL

The following persons should be contacted in case of emergencies:

1. Name: (Print) _____ Phone number: _____

2. Name: (Print) _____ Phone number: _____

Registration will not be accepted without a signed waiver (See below).

Mail this form with a non-refundable check of \$175.00 payable to:

Methodist University, 5400 Ramsey Street, Fayetteville, NC 28311 [ATTN: Sheila Blue]

Signature of Child

Signature of Parent/Guardian

Date

Section 2: Waiver

I hereby waive and absolve the Methodist University STEM Summer Camp of any and all liability and responsibility for injuries, sickness, accidents, and/or acts of God incurred during participation in this camp for _____ (child name). In consideration of my application being accepted, I, my heirs, administrators, executors, and assigns, intending to be legally bound, do hereby, waive, release, and forever discharge any and all rights and claims for damage which I may have or which may hereafter accrue to me against Methodist University, the Camp Director, or their respective employees, office, agent, representative, successors, and/or assignee, for any and all damages which may be sustained or suffered by me in connection with my association with or participation in the camp. I grant the University, its employees, agents, and representatives the authority to act in any attempt to safeguard and preserve the health or safety of my child, including authorizing medical treatment on my behalf and at my expense in case of an emergency. Furth I recognize that if a camper is asked to leave due to behavioral considerations, camp fees will be forfeited with no refund.

Signature of Child

Signature of Parent/Guardian

Date

Section 3: Publicity Release

I hereby give my permission _____ to be photographed, videotaped, and/or audiotaped during the do not give my permission

Summer Camp. Such photographs, videotapes, and audiotapes may be used in print or broadcast media as deemed appropriate for promotion and publicity purposes.

Signature of Child

Signature of Parent/Guardian

Date