



# Parent/Guardian and Applicant Consent

PO Box 723, Platteville, WI 53818

Phone: (608) 348-9689

www.BadgerCamp.org

## **Parent/Guardian and Applicant Consent:**

THIS PAGE MAY BE PRINTED AND SENT AT A LATER DATE WITH THE COMPLETED SIGNATURE SO THAT THIS APPLICATION MAY BE SENT AS SOON AS POSSIBLE. THIS COMPLETED CONSENT SECTION MUST BE RECEIVED AT THE CAMP OFFICE NO LATER THAN 3 WEEKS BEFORE ATTENDANCE TO CAMP.

## **PARENT/LEGAL GUARDIAN AND APPLICANT CONSENT (Please read carefully)**

- I give my permission for above named applicant to participate in Wisconsin Badger Camp, Inc. activities on and off site and in the community including but not limited to: riding in vehicles, swimming, horseback riding, canoeing, boating, climbing, archery, and all camp activities as described in the Wisconsin Badger Camp General Information Brochure.
- Permission is given to Wisconsin Badger Camp to use photographs (individual or group) of above named applicant in their camp promotion and solicitation, including newspaper, magazines, news bulletins, movies, television, website and displays.
- Permission is given to transport above named applicant in vehicles during camp activities.
- I hereby give permission to Wisconsin Badger Camp to provide routine healthcare, administer prescribed medications, and non-prescription medications as necessary and seek emergency medical treatment. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp to secure and administer treatment, including hospitalization for the above named applicant.
- I understand precaution is taken to safeguard the health and safety of the campers under Wisconsin Badger Camp supervision.
- I agree to relieve Wisconsin Badger Camp and all personnel from any liability in connection with this activity.
- I AGREE NOT TO SEND ABOVE NAMED APPLICANT TO CAMP IF (S)HE HAS BEEN EXPOSED TO A CONTAGIOUS DISEASE WITHIN THREE WEEKS OF THE DATE (S)HE IS TO REPORT TO CAMP, AND I WILL NOTIFY THE CAMP REGARDING THE CONDITION IMMEDIATELY.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Please Print Parent/Guardian Name

\_\_\_\_\_  
Please Print Applicant's Name

**\*\*Guardian signature is required for admittance to camp. If it is not completed upon arrival at camp the camper will NOT be allowed to stay under Wisconsin Badger Camp's care until it is received and the camper will be sent home until it is completed. NO EXCEPTIONS!!!!**