

Kids Camp Activity Waiver

Camper Information

Child's Name

Date of Birth

Parent/Guardian Name

Contact Phone/Email

Waiver of Liability

I acknowledge that participation in all camp activities involves possible risks, including but not limited to physical injury. I hereby release and hold harmless the camp organizers, staff, and volunteers from any and all liability, claims, and demands arising from my child's participation.

Medical & Emergency Information

Please list any allergies, medical conditions, or special needs

Emergency Contact (Name & Phone)

Consent & Signature

By signing below, I confirm that I am the legal parent/guardian of the child named above and agree to this waiver and all conditions stated.

Parent/Guardian Signature

Date
