

2023-24 PARENTAL RELEASE FORM

l,					, am th	ie legal į	parer	nt/gua	rdian of	: 						
(Parent/Guardian Name)											(0	Campe	r Name)		
and give	e permission for t	he cam	per to a	ttend an	d parti	cipate ir	n the	Prince	ton Uni	iversity						
											(0	Camp I	Name)			
which w	vill be held on	/	_/	to	/_	/	<u>_</u> .									
On beha	alf of the camper,	the car	mper's p	arents a	and/or l	legal gu	ardia	n, I he	reby:							
1.	agree to assume activities;	e all risk	of pers	onal inju	iry and	propert	y los	s arisii	ng from	participation	on in any	camp	athletic	and re	creat	ional
2.	agree to hold harmless the camp staff, The Trustees of Princeton University, its trustees, officers employees, agents, representatives responsible for any injury or property loss sustained during participation in any camp athletic and recreational activities;															
3.	grant permission to the camp staff or medical personnel to render, or engage medical personnel to render, preventative, first aid and/or emergency treatment that they deem necessary to the camper's health and well-being. I understand that reasonable effort will be made to contact me, or the emergency contacts listed below, prior to such action and any expenses incurred are at my expense;															
4.	agree to accept	any dec	cisions n	nade by	the can	np staff	in th	e term	ination	of camp at	tendance	e;				
5.	grant The Trustees of Princeton University, its trustees, officers, agents, representatives, employees and students permission to videotape, photograph or otherwise record the camper and to use such recordings and biographical data in any media, on a perpetual basis, for all purposes consistent with Princeton University's mission.															
legal gu from an	deration for perm ardian, I release I y and all claims w y loss arising out	The Trus hich th	stees of e campe	Princeto er, the ca	on Universe on Uni	ersity, it s parent	ts tru s and	stees, d/or le	officers gal guar	, agents, re dian, may	presenta have as a	atives, a result	employons or pers	ees and onal in	d stud ijury d	lents
Parent/	Guardian Signatu	re:										C	oate:	/	/_	
Parent/	Guardian Name: ₋															
1st Emergency Contact Name:										Phc	ne #:					
2 nd Emergency Contact Name:										Pho	one #:					

Please upload in advance to your ACTIVE ACCOUNT.

This form is required for each camp you are attending. Please upload a copy for each camp.