

2024-25 PARENTAL RELEASE FORM

l,					_, am th	ie legal	paren	ıt/guar	dian of _						
(Parent/Guardian Name)								(Camper Name)							
and give	e permission for	the cam	per to a	ttend ar	nd parti	cipate i	n the	Prince ¹	ton Unive	ersity					
	•				·					,	(Ca	mp Name))		
which w	vill be held on	/	/	to	/	/_									
On beh	alf of the campe	r, the ca	mper's ¡	parents a	and/or	legal gu	ıardia	n, I her	eby:						
1.	agree to assum activities;	e all risl	of pers	onal inju	ury and	proper	ty loss	s arisin	g from pa	articipation i	in any ca	amp athlet	ic and	recrea	tional
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 de	cisions r	nade by	the car	np staff	f in the	e termi	nation o	f camp atter	ndance;				
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 peri ardian, I release by and all claims by loss arising out	The Tru which th	stees of ne camp	Princeto er, the c	on Univ amper'	ersity, i s paren	its trus	stees, o	officers, a gal guard	agents, repre ian, may hav	esentativ ve as a re	ves, emplo esult or pe	yees a rsonal	nd stu injury	dents
Parent/Guardian Signature:										Date:_	/_	/			
Parent/	Guardian Name:														
1 st Emergency Contact Name:									Phone	#:	-				
2 nd Emergency Contact Name:								Phone	e #:						

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.