



Denver Firefighters Museum
The Hottest Place in Town!
1326 Tremont Place
Denver, CO 80204
303-892-1436

Jr. Firefighter Academy Camp Registration

Illness Guidelines and What to Expect

We know that safety is one of the top considerations when choosing camps and classes for your child. In order for all registered campers to have an amazing experience at the Junior Firefighters Academy Camp, please review the following guidelines and what to expect to help us ensure a safe and fun week for everyone.

Illness Guidelines:

Before you arrive:

- Take your child’s temperature prior to bringing them to camp to check for a fever.
- Keep your child home if they are experiencing symptoms of: Fever/chills, cough, shortness of breath, difficulty breathing, muscle aches, sore throat, new loss of taste or smell.

During camp:

- If your child starts feeling ill during camp for any reason, our Education and Outreach Coordinator will contact the emergency contact listed on their registration sheet so that the camper can go home early if necessary.

I have reviewed Jr Firefighter Academy Camp Illness Guidelines

Initial: _____

I agree to follow the steps outlined under “Before you arrive” of checking children’s temperature and health screening.

Initial: _____

Guardian Signature: _____ Date: _____

Guardian Print Name: _____

Denver Covid-19 information can be found at <https://www.denvergov.org/Government/COVID-19-Information>

Registration Form

Child Information

Child Name: _____ Birthday: _____
Address: _____ City: _____
State: _____ ZIP Code: _____

Parent/Guardian Information

1. Name: _____ Relation to Child: _____
Address: _____ City: _____
State: _____ ZIP Code: _____
Home Phone: _____ Mobile: _____ Email: _____

2. Name: _____ Relation to Child: _____
Address: _____ City: _____
State: _____ ZIP Code: _____
Home Phone: _____ Mobile: _____ Email: _____

Designated Drop-off/Pick-up Adults (list first and last names): _____

Emergency Contact: _____ Relation to Child: _____
Home Phone: _____ Mobile: _____
Is your child(ren) allergic to anything? YES / NO
If yes, please explain: _____

I understand that I will be notified in the case of a medical emergency involving my child. In the event I cannot be reached, I authorize the calling of a doctor and the providing of emergency medical services in the event my child is injured or becomes ill.

Parent / Guardian Initials: _____

I understand that Denver Firefighters Museum or its Jr Firefighter Academy will not be responsible for any medical expenses incurred, but that such expenses will be my responsibility as parent/guardian.

Parent / Guardian Initials: _____

Terms of Agreement

Denver Firefighters Museum, its volunteers and its employees are not responsible for lost or damaged personal property. The museum reserves the right to remove a student/child from the program due to behavioral issues. I understand that no fees will be refunded or transferred. I acknowledge there is inherent risk to activities during the Jr. Firefighter Academy, and acknowledge Denver Firefighters Museum, and its staff, will not be held responsible for any injuries which may occur. In case of an emergency, I authorize my child to be treated by Certified Emergency Personnel (i.e., EMT, First Responder, and/or Physician). All Scheduled events are subject to change.

By signing below, you are acknowledging that you have been given the opportunity to read and thus agree to the Covid-19 Guidelines, Registration Form, and Terms of Agreement.

Printed Name: _____ Date: _____

Signature: _____ Date: _____