

SEA AND SUN CAMP Inc.

WAIVER

In consideration of the acceptance of this application form, I the undersigned, intending to be legally bound, do hereby for myself, my heirs, executors, administrators and assigns, knowingly and willingly waive any and all rights and claims for damages I may have against the persons or entities connected with this event, including the Lions Of Mississippi Activities Corporation and Sea and Sun Camp, Inc., and I release and hold them harmless for any and all injuries sustained in connection with this event. I acknowledge that Lions of Mississippi Activities Corporation and Sea and Sun Camp, Inc. do not provide medical insurance, and any medical expenses are my responsibility. I hereby grant full permission to use my name and image in any photographs, videotapes, motion pictures, recordings, broadcasts, Social Media, Web Site, Internet or other record of this event. I hereby grant full permission to use my child's Eye Report Form, IEP, and any other medical or educational information for the purpose of training volunteers and/or Interns. I further attest that I have read this waiver.

ALL BLANKS MUST BE COMPLETED

Campers are required to sleep at camp.

Parent Must Sign _____

Signature

Date: _____

(PRINT Parent NAME) _____

(PRINT Camper NAME) _____

Birthdate _____

Male / Female _____



Mailing Address _____

City/State/Zip _____

CELL Phone: _____

E-Mail: _____

(Circle ONE)

T-SHIRT SIZE (adult sizes): Small Med L XL 2XL 3XL 4XL 5XL

(If Camper is too small for 'adult small', please write in youth size needed.)