



**2012 MICHIGAN YOUTH TROUT CAMP
PARENT/GUARDIAN CONSENT**

I, _____, am the parental/legal guardian of _____
Parent name Camper name

I hereby consent to his/her participation in the Michigan TU Youth Trout Camp sponsored by the Kalamazoo Valley Chapter of Trout Unlimited. In determining whether to allow him/her to participate, I recognize that Trout Unlimited cannot be held responsible for him/her in the event of Injury while participating in the "Camp". I also realize that participation can involve risk of serious physical injury or death and agree, on his/her behalf, to assume risks.

I agree to release and indemnify the Kalamazoo Valley Chapter of Trout Unlimited, its officers, trustees, directors, employees, and agents from and against any and all claims, demands and judgment arising from injuries, damages or theft in connection with his/her participation.

Boat Trip Consent: This year's camp experience will include a half day float trip with a guide, as well as a canoe trip down the AuSable. In addition to the above general consent I specifically consent to allow _____ to participate in these activities.

Camper name

Please circle: Yes / No _____

Parent/Guardian Initials

Medication(s)

_____ is under the care of _____
Camper Name Physicians Name

The physician can be reached at Telephone Number _____, if necessary to replace lost or misplaced medication. Please List any medications on the back of this form and the amount and schedule the student is to follow, even if the student knows the amounts and schedule to follow.

I agree that any prescribed medication for concentration and/or behavior used during my son/daughter's regular school year will be continued for Camp, and brought to the attention of the Staff.

Signature of parent or legal guardian Date

Home Phone # Work Phone # Cell Phone #

Email address