



Camper Release Form (Page 1 of 2) Health Form – must be signed by physician

Camper's Full Name: _____

Please mail, fax, drop off, or email this completed form to:

Audubon Vermont, 255 Sherman Hollow Rd. Huntington, VT 05462

Fax: (802) 434-4686

Email: vermont@audubon.org

THIS FORM MUST BE SIGNED BY YOUR PHYSICIAN, BUT WE WILL ALSO ACCEPT A COPY OF A RECENT PHYSICAL EXAMINATION FORM.

During Audubon Vermont's Ecology Day Camp and Preschool Nature Camp programs the children will be spending a majority of their time outdoors. Daily activities include hiking, playing cooperative games, and exploring the forests, ponds and meadows. Children will be exposed to the sun, varying weather conditions and a variety of plant and animal species. If there are any health concerns or limitations that we should know about, please list them in the spaces provided below. Thank you.

Age (on first day of camp) _____ **Date of Birth** _____

Gender _____ **Weight** _____ **Height** _____

Allergies:

Current Medications:

Health Concerns/Problems:

Physical Limitations:

Other Issues of Importance:

Date of Last Booster:

The above named camper has all appropriate immunizations, including tetanus. This camper is physically able to participate in all camp activities, with the exception of limitations that have been noted above.

Physician's

Signature _____ **Date** _____

Parent/Guardian

Signature _____ **Date** _____

Camper Release Form (Page 2 of 2)

Use of Image Release

Camper's Full Name: _____

I, the legal parent and or guardian of the above referenced child, agree and understand that photographs and audio-visual productions, which may include my child's image, appearance and/or voice, may be taken and/or produced at National Audubon Society, Inc.'s ("Audubon") Green Mountain Audubon Summer Camp, from 06/20/16 through 08/19/16 and may be used in Audubon publications and media for Audubon's advertising, publicity, commercial or other business purposes. I hereby give Audubon permission, in any manner and in any and all media, including but not limited to the Internet, whether known now or hereafter devised, in perpetuity, to: (i) duplicate and distribute the photographs, or any parts thereof which include my child's image, and (ii) to reproduce my child's appearance, name, likeness, voice, biographical material or any material based upon or derived therefrom in any audio and/or video production. I agree that I have no claim for compensation; my child's participation in any photograph or audio-visual production may be edited at Audubon's sole discretion, and I waive any right to inspect or approve the finished version(s).

I hereby release and hold harmless Audubon and its officers, directors, employees, agents, licensees, successors and assigns from and against any and all claims, demands or causes of action which I may have or may in the future have for libel, defamation, invasion of privacy or right of publicity arising from Audubon's use of my child's appearance, name or likeness including but not limited to, the distribution, reproduction or broadcast of the photographs (or any part thereof).

Parent/Guardian Signature: _____

Print Name: _____

Address: _____

Date: _____

-OR-

If not granting full use of image release, please indicate your preference below:

Please do not use any photos of my child

Audubon may use my child's image as described above but with the following restrictions and/or limitations: **(please sign above)**

