

AFL Kids' Camp 2015

Parent/Guardian Authorization Form

Please fill in and return to the AFL before July 13th. Fax to 780-484-5928, scan and e-mail to afl@afl.org or enclose in the attached self-addressed envelope.

Camper's Name: _____

Guardian's Name: _____

Relationship: _____

The health and general history of the camper is correct as far as I know, and the person herein described has permission to engage in all camp activities, except as noted by me. I understand that campers will be involved in a number of outdoor programs and activities. It is my understanding that this camp program will be carefully supervised and instructed by qualified persons but will require responsible behaviour on my child's part.

In case of an emergency, **I give permission for Goldeye Centre, Centre for Outdoor Education (COE) and Alberta Federation of Labour Kids' Camp staff to render first aid as necessary.** I understand that every reasonable effort will be made to contact me or my stated emergency contact. If I/they cannot be reached, I hereby give permission to the physician selected by the Camp Director/Designate to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child named. I agree to pay for an ambulance, and medications if necessary.

- I CONSENT** to the administration of over the counter medication such as Gravol, Tylenol, or Benadryl as needed and provided by a qualified nurse.
- I DO NOT CONSENT** to the administration of over the counter medication such as Gravol, Tylenol, or Benadryl as needed and provided by a qualified nurse.

I consent to discipline rendered against my child by any officer, employee or agent of the Alberta Federation of Labour Kids' Camp for any disruptive behavior considered to be offenses under the Alberta Federation of Labour Kids' Camp Code of Camper Behavior. I understand that if my child is not following the camp rules the camp staff will be responsible for guiding my child through discussion and leadership to follow the rules. If at any time my child is unable to cooperate and is not willing to work with the camp staff to understand and follow the camp rules I understand that I will be notified after all possible discussions and methods of communication have been attempted.

In the event that my child demonstrates behavior that would render them being excluded from the Camp, I take entire responsibility for arranging transportation for my child from the camp. If for some reason, I am not able to arrange transportation for my child from the camp, I will cover all costs incurred by the Alberta Federation of Labour Kids' Camp in the transportation of my child.

Parent/Guardian's Signature: _____

NAME (Print): _____

Date: _____

My parent/guardian has discussed this with me:

Camper's Signature: _____

NAME (Print): _____

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