

Parental Statement and Consent/Liability Waiver



Important Medical Information

- All medication is self administered by participant.
- Participant must know what their medication is, be able to recognize it, know the dosage, and when to take it.
- The camp staff will provide reminders of when medicine is to be taken.
- Due to possible side effects, the first dose of new medicine must be taken 24 hours prior to attending camp.
- All medications taken during program hours must be in their original pharmaceutical container with prescription dosage and name clearly marked.
- Camp staff will accept no more than two weeks of medication, the amount to be verified in writing by camp staff and the parent/guardian.

- I hereby certify that the medical history I have provided is accurate and complete to the best of my knowledge.
- I, the undersigned, for ourselves, our heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the Summer Day Camp at the Rowan University Recreation Center, Rowan University and its respective agents, representatives, successors, and assignees, for any and all injuries which may be suffered by my child(ren) in connection with the Summer Day Camp program.
- I agree to allow my child to participate in the Kids Rule Summer Camp and affirm that my child's participation is **completely voluntary**. I understand that there are risks inherent in the activities my child will engage in at the Kids Rule Summer Camp such as contact with other individuals playing in the game; contact with the floor, walls, goals, posts or equipment which are part of the playing area. The specific risks vary from (1) minor injuries such as scratches, bruises and sprains, to (2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions, to (3) catastrophic injuries including paralysis and death. I also understand that, despite safety precautions, neither the Kids Rule Summer Camp nor Rowan University can guarantee that my child will not be injured. My child and I are willing to assume these risks. To minimize the risk, I have instructed my child to obey all the rules, regulations and instructions of the Kids Rule Summer Camp.
- I understand that in the case that my child becomes ill during the program, I will be contacted as soon as possible. If the parent or guardian is unable to be reached, the child's emergency contact will be notified. It is the responsibility of the parents or guardians to arrange for the child to be picked up from the center as soon as possible.
- My signature authorizes the management and staff of the Kids Rule Summer Camp to act for me according to their best judgment in the event of a medical emergency and/or routine medical care. I grant permission for emergency medical treatment and/or routine medical care by the Kids Rule Summer Camp staff, Rowan EMS, and/or hospital or emergency health care facility staff, under the same circumstances as above, if needed. Any such action will be taken in the best interest of my child and will be reported to me/us as soon as possible. My signature waives and/or releases the Kids Rule Summer Camp from any and all liability and/or financial responsibility for any medical expenses incurred.
- I hereby grant permission for the Kids Rule Camp staff to arrange for transport of my child(ren) to a local hospital for treatment if such transport is deemed by them to be in the best interest of my child(ren)'s welfare.
- I have read the Parent Guide and understand all information on policies and procedures, and agree to follow them.

Parent or Guardian's Name: (please print) _____ Phone: _____ Date: _____

Parent or Guardian's Signature: _____

If unable to reach the above signed, in case of an emergency please contact:

Name: _____ Phone: _____ Relationship: _____

Please return Medical History Form & Immunization/Vaccination Records to:

Rowan University Recreation Center Summer Day Camp

201 Mullica Hill Road, Glassboro NJ 08028

Phone: (856) 256-4908 Fax: (856) 256-4428