

Approval of Parent or Guardian/Photograph consent form

***** MUST BE COMPLETED AND TURNED IN AT PARENT/CADET MEETING*****

I hereby voluntarily waive and release any and all rights and claims for damages I may have against any and all individuals associated with the Camp Cadet Program, The Pennsylvania State Police, Allegheny College, Crawford County, and the state of Pennsylvania while child (**Cadet's Name**) _____ attends the Troop E Camp Cadet Program during the designated dates and times for all injuries/illness suffered by him/her at said camp. I attest and verify that my child is physically fit and able to attend the camp.

In the event of an emergency, I hereby give my permission to the physician or hospital selected by the camp administration to hospitalize and / or secure proper emergency medical treatment for the child named on this form.

I also hereby authorize the child to be photographed for official Camp Cadet use. I understand that any photos taken may be used in Camp Cadet publications, website or Camp Cadet sponsored events and that we will not be compensated for any such usage.

I acknowledge that Troop E Camp Cadet is bound to the Covid-19 protocols put in place by Allegheny College and are subject to change.

All Cadets will be run through the Criminal Justice Computer. Any arrest that is not indicated on the attached paperwork will be grounds for immediate disqualification.

Applicant Cadet's Signature _____

Print name _____

Parent/Guardian Signature: _____

Print name _____

Date: _____