



**City of Ann Arbor
Parks & Recreation
Summer Day Camps
Activity & Release Authorization Form**



Complete and return this document to the Camp Location on or before the first day of camp. Each camp location will need a copy of this form. If your child is attending more than one week of camp at the same location, only one copy of this form should be submitted.

Child's Name: _____ Child's Date of Birth: _____

Camp Location: (check one) Argo Gallup Fuller Buhr Leslie

Camp Sessions & Dates: _____
(If attending more than one week at same camp location, list all weeks.)

I understand that my child's participation in City day camp may include activities such as, but not limited to, sports, boating, swimming, or other water activities; field trips to natural or urban areas involving walking or hiking; entertainment, such as movies or live performances; and transportation by van, bus, or other vehicle. I give my child permission to engage in all day camp activities unless I communicate a restriction in writing to day camp staff in a timely manner. (For a description of activities at a particular day camp, please contact camp staff.) I wish to place the following restrictions on my child's activities: (Leave blank if no restrictions)

I understand my child will be sent home if his/her behavior endangers the health or welfare of others, disrupts camp activities, or is otherwise deemed inappropriate by camp staff. If my child must return home, I will arrange transportation within a reasonable time specified by camp staff. **Please note:** Parents/Guardians must notify camp staff each day that their child is leaving camp with someone other than a parent/guardian. If a custodial parent/guardian wishes that a child **not** be released to a non-custodial parent/guardian, the request must be submitted in writing. You may update this list at any time.

Name: _____ Relationship to Child: _____ Phone: _____
Name: _____ Relationship to Child: _____ Phone: _____
Name: _____ Relationship to Child: _____ Phone: _____
Name: _____ Relationship to Child: _____ Phone: _____

*List yourself first and any other persons who may pick-up your child.

I understand that there may be inherent risks involving illness, bodily injury, and property loss or damage resulting from my child's participation in City day camp. I assume all risk, individually and on behalf of my child, and agree to indemnify and hold the City harmless from liability for illness, bodily injury, and property loss or damage resulting from my child's participation in City day camp. I agree to indemnify the City for all costs, damages, and expenses incurred by the City as a result of an action or claim brought against the City arising out of my child's participation in City day camp.

I understand that the City of Ann Arbor Parks and Recreation Department staff occasionally take pictures to promote Parks Department programs in promotional materials, such as brochures, fliers, display boards, videos and/or slide presentations. I hereby agree to allow my child to be photographed for this purpose. I understand if I do not wish to allow my child's photograph to be used for this purpose, I must submit a request in writing.

Parent/Guardian Signature: _____ Date: _____

Print Name: _____ Phone: _____