**Permission Form**

**Kids In Open Spaces Summer Day Camp**

Kids In Open Spaces Summer Day Camp may include activities such as using natural materials for crafts, physical games, walking and/or running on unpaved and rough trails, water based activities, interaction with animals and people on public lands, and other natural and social interaction based risks and activities.

I acknowledge that all photos, video, and other media captured during summer camp is owned by Salt Lake City (the “City” or “SLCC”) and may be used for marketing purposes, or for any other purposes, at the City’s discretion. I hereby release any rights I might otherwise have regarding the creation or use of such media.

I hereby represent that I am the parent or legal guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a minor child who desires to participate in Salt Lake City’s Kids in Open Spaces Summer Day Camp during 2018. By my signature below I give my permission for my child to participate in the Kids in Open Spaces Summer Day Camp, with full knowledge of the risks of participating in the day camp. I also acknowledge that an emergency contact will be available throughout camp in the case of an emergency.

Parent/Guardian’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_, 2018

Emergency Contact Name: ­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Secondary Emergency Contact Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any allergies your child has and whether they will have an EpiPen/ other medication with them:

Any other notes to share with camp counselors regarding your child:

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