



CONSENT TO TREAT MINOR CHILDREN
Please print all information

I, _____, parent or legal guardian of
_____, born _____, do hereby consent
to any medical care determined by a physician to be necessary for the welfare of my child while said child is under
the care of CAMP LIKE MAX and I am not reasonably available by telephone to give consent. CAMP LIKE
MAX is not liable for any treatment administered by a physician or medical facility. This authorization is effective
from June 16, 2023 to June 18, 2023.

Signature of Parent or Legal Guardian Witness Signature

ADDITIONAL INFORMATION:

Camper Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone:

Guardian One: _____ home _____ work

Guardian Two: _____ home _____ work

Child's Birthdate: _____ Last Tetanus: _____

Allergies to drugs or foods: _____

Special Medications, Blood Type or Pertinent Information

Child's Physician _____ Phone _____

Insurance _____ Policy # _____

Policy Holder's Name _____

Preferred Hospital _____

*This consent form should be completed for each camper. It should be taken with the child
to the hospital or physician's office should the child be taken for treatment.*



PHOTO USE RELEASE FORM

I, _____, hereby grant and authorize CAMP LIKE MAX the right to take, edit, alter, copy, exhibit, publish, distribute and make use of any and all pictures or video taken of my registered camper(s) to be used in and/or for legally promotional materials including, but not limited to, newsletters, flyers, posters, brochures, advertisements, fundraising letters, annual reports, press kits and submissions to journalists, websites, social networking sites and other print and digital communications, without payment or any other consideration. This authorization shall continue indefinitely, unless I otherwise revoke said authorization in writing.

I understand and agree that these materials shall become the property of CAMP LIKE MAX and will not be returned. I hereby hold harmless, and release CAMP LIKE MAX from all liability, petitions, and causes of action.

Legal Guardian

Date