

**Adirondack Treks
Medical History and Release Form**

Name of Participant: _____

Address: _____

Phone: _____ **Date of Birth:** _____

Parent/Guardian Printed Names: _____

E-Mail: _____

WATER ACTIVITIES

In the event that the trip or activity takes place in total or in part on or near water, I certify that this youth participant/guest is a (Check one):

- Non-Swimmer
- Beginner swimmer (swim 25 ft., make sharp turn, and swim back 25 ft.)
- Advanced swimmer (Swim 75 yds. make a sharp turn, swim back 75 yds. using good strokes)
- Lifeguard certificate

All water activities will be conducted with reasonable safety guidelines. When feasible, a certified lifeguard will be on the trip.

Waiver of Claims

In consideration of the benefits to be derived from participation in Adirondack Treks trips or activities, any and all claims against Adirondack Treks, Inc., Learning for Life (Boy Scouts of America), Town of Johnsbury Youth Committee, the group, and the participating organizations, or against the officers, employees, agents, or other representatives of any of them, or any other persons working under their direction or engaged in the conduct of their affairs, arising out of any accident, illness, injury, damage, or other loss or harm to/or incurred or suffered by the applicant named above or to his or her property, in connection with or incidental to the Treks trip or activity, including preliminary training and travel, are hereby expressly waived by the applicant and the applicant's family or guardians. We have read over the informed consent page and recognize the potential risks in Treks' activities.

YES

NO

Talent Release

I hereby assign and grant to Adirondack Treks and Learning for Life the right and permission to use and publish the photographs/film/ videotapes/electronic representation and/or sound recordings made of me or my child by Learning for Life (BSA) or Adirondack Treks, and I hereby release Learning for Life or Adirondack Treks from any and all liability from such use and publication. I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said photographs/film/video/electronic representations and/or sound recordings without limitation at the discretion of Learning for Life and Adirondack Treks, Inc., and I specifically waive any right to any compensation I may have for any of the foregoing.

YES

NO

Equipment Use

I will assume responsibility for any damage or loss for the value of the repairs or replacement for any Treks equipment that my child borrows. I understand that there is no charge for single day use, but a \$1 donation is happily accepted.

YES NO

Medical History and Release

Please check any that apply to participant:

_____ Hay Fever _____ Diabetes _____ Asthma _____ Other (specify)
_____ Bee Stings _____ Convulsions _____ Penicillin

Date of last tetanus booster: _____

Current Prescribed medication(s): _____

I grant permission to the leader of the activity to dispense to my child any prescribed medication he/she is currently taking.

YES NO

Health Insurance Information

Insurance Company: _____ ID/Policy Number: _____

Family Physician: _____ Phone Number: _____

I understand that I will be notified in case of serious injury or illness. However, in the event that I can not be reached, I hereby give permission for my child to be medically treated by a physician or medical facility as appropriate.

YES NO

Approval (If two parents/guardians, both need to sign.) For School Year: _____

Parents/Guardians: Please read all of the above statements before giving your approval for participation in Adirondack Treks' activities. I hereby approve and agree to all of the terms, conditions, and waiver of claims of this consent form and certify its correctness. Further, I agree that this participant or guest can meet the health and physical fitness requirements of Adirondack Treks trips and activities.

Parent/Guardian Signature and Date

Parent/Guardian Signature and Date

Disclaimer: By typing my name, I intend this to represent my signature.