



Summer Camp Registration Form

Fill out completely and bring on first day of the camp you are attending.

Please Print Clearly:

Date: / /

Student's Name _____

Parent Name(s) _____

Parent Contact Number(s) () _____

() _____

Backup Contact Number () _____

Consent for Medical Treatment of a Minor

Date of Birth _____

Age _____

Parent Name(s) _____

Does the student have any allergies? _____

Does the student have any medical conditions that may arise during camp and requires immediate administration of prescribed medication (eg, asthma, diabetes)? _____

Emergency Contact: _____

In the event a parent cannot be reached, please contact:

Name _____

Emergency Contact Phone _____

Preferred Physician _____

I hereby give my consent for medical treatment deemed necessary by physicians designated by the organization and for transportation to a hospital emergency room for treatment of any illness or injury resulting from his/her participation. I understand this authorization will only be enforced when I cannot personally be contacted and provide for immediate treatment, and I accept all financial responsibility for such treatment. I, the parent/guardian of the child named in this form entry, Agree.

Signature: _____

Pick Up Authorization

List all people who are authorized to pick up your child/children, aside from parents. Campers will only be dismissed to parents or an authorized pick-up person. **If camper is able to arrive and leave on their own, please check the box and sign below***.

Authorized Pickup Person 1: _____

Authorized Pick Up Person 1 Phone: _____

Authorized Pickup Person 2: _____

Authorized Pick Up Person 2 Phone: _____

* My child is allowed to arrive and leave Professor Gizmo's Workshop Summer Camp of their own accord, and my signature is provided below to allow this:

Signature: _____ Date: _____

Enrollment Agreement

IN CONSIDERATION of being accepted to participate in the classes, programs or activities offered by Professor Gizmo's Workshop (a "Program", or the "Programs"), the undersigned hereby enters into this Enrollment Form and Agreement with Professor Gizmo's Workshop as of the date set forth below. As used in this Enrollment Form and Agreement, the terms "I", "my", "me", "you" and "your" refer to Participant. If Participant is a minor, the terms "I", "my", "me", "you" and "your" refer to Participant's parent or legal guardian for him or herself and on behalf of Participant. The term Professor Gizmo's Workshop refers to the owners, operators, employees and agents, all in their respective capacity.

NOW THEREFORE, in consideration of being accepted as a Participant in any Professor Gizmo's Workshop program, I, for myself, my personal representatives, assigns, heirs, and beneficiaries acknowledge and agree to the following:

The owners and operators of Professor Gizmo's Workshop make every effort to conduct safe programs, to orient and support children, and to inform families of inherent risks. Some activities may involve risks that children do not routinely encounter at home. Risk management is an essential element of all the activities offered. While we anticipate that these efforts will ensure the wellbeing of each child, we are also aware that it is neither possible to foresee every contingency nor to eliminate all risk.

I understand that program activities may include, but are not limited to: the use of low-temperature hot glue guns, use of hand tools and supervised small power tools including, but not limited to drills, scroll saws and sanders, as well as the risk associated with airborne objects (paper airplanes, egg drops, etc.), and other risks associated with building small projects and participating in science and engineering challenges.

I acknowledge that such risks exist, and I hereby agree on behalf of my child to assume such risks. Further, on behalf of my child, I hereby release and forever discharge, and agree not to sue, and agree to indemnify and hold harmless,

Professor Gizmo's Workshop, and its officers, directors, employees, and agents, and each of them, from and against any and all liabilities and obligations of every kind and description, which I shall or may have against them or any one or more of them arising out of, or in connection with, my child's participation in the Professor Gizmo's Workshop program and activities, for any personal injury that my child may suffer while participating in the Professor Gizmo's Workshop program and activities.

I understand and agree on behalf of my child that my child shares the responsibility for safety during Professor Gizmo's Workshop programs and activities, and I personally assume on behalf of my child that responsibility.

I understand that in order to participate in Professor Gizmo's Workshop programs, my child must abide by the established rules and codes of conduct established by Professor Gizmo's Workshop. Professor Gizmo's Workshop reserves the right to dismiss my child if he or she is consistently disruptive of the program, including but not limited to verbal and physical aggression against Professor Gizmo's Workshop staff or other participants, failure to follow safety or program instructions, and any other disruptive behavior as determined by Professor Gizmo's Workshop staff at their sole discretion. Such disciplinary dismissal may result in the loss of fees paid.

I understand and certify that my child's participation in the Professor Gizmo's Workshop program and its activities is completely voluntary, and that I have become familiar with the program activities in which my child may participate.

If any illness, injury, or accident occurs which, in the sole judgment of Professor Gizmo's Workshop, requires immediate medical attention, I give consent for Professor Gizmo's Workshop to obtain such emergency treatment. I understand that the cost of any medical care deemed necessary for the treatment of any such emergency is my responsibility, and that Professor Gizmo's Workshop is not obligated to pay for such medical care.

Signed: _____ Date: _____

I agree to the use of pictures and videos of my child for the purpose of sharing workshop activities and promotional intention.

Signed: _____ Date: _____