

Authorization Form



Camper Name: _____

Camper Unit: _____

Camper Name: _____

Camper Unit: _____

Camper Name: _____

Camper Unit: _____

Sunscreen:

I DO ___ I DO NOT ___ authorize the JCC to apply sunscreen on my child's skin. Sunscreen must be sent in by the parent and labeled with the child's name.

Insect Repellent:

I DO ___ I DO NOT ___ authorize the JCC to apply insect repellent on my child's skin. Insect repellent must be sent in by the parent and labeled with the child's name.

Face Paint:

I DO ___ I DO NOT ___ authorized the JCC to put face paint on my child for special activities or events.

Address Release:

I DO ___ I DO NOT ___ authorize the JCC to release my address and phone numbers to other parents whose child(ren) are affiliated with this program.

Photos:

I DO ___ I DO NOT ___ hereby grant permission for my child to be included in pictures connected with Camp Shalom. (Note: This does not give us permission to use these pictures in advertisements or publications -see below)

I DO ___ I DO NOT ___ authorize the JCC to use my child's picture for the purpose of publicity and/or advertisement.

Child Abuse:

I DO ___ understand the procedures for suspecting and reporting child abuse/neglect and that, the Camp Shalom staff is legally obligated to report any suspicions to the appropriate authorities.

Parent/Guardian name: _____

Parent/Guardian signature: _____

Date: _____



