

## SUMMER ADVENTURES CAMP MEDICAL RELEASE

The Parent hereby authorizes the School to supply medical care as needed for Student (including administration of allergy medications, Epi-Pens, etc. according to the Student's prescription from a licensed practitioner) or other minor medical care of emergency as determined to be appropriate y the School Staff. Parent hereby releases and holds the School harmless from any liability which might arise from the provision of such medical care.

If, in the opinion of a properly licensed and practicing physician, Student needs medical or surgical services which require Parent's pre-authorization or consent, Parent hereby authorizes, appoints, and empowers the School to act as Parent and furnish such consent on Parent's behalf. Parent confirms that it is Parent's desire that Student be furnished with such medical or surgical services as soon as reasonably possible after the need arises. Parent hereby releases and holds the School harmless from any liability which might arise from the giving of such consent. Parent agrees to reimburse the School for any medical expenditures made on Student's behalf.

Parent's Signature \_\_\_\_\_ Date\_\_\_\_\_