



g r e t c h e n ' s h o u s e c h i l d c a r e c e n t e r s

Summer Camp Permissions for _____

Child's Name

- Health Record.** I/we acknowledge that our child is in good health and her/his immunizations are current. Further, any health restrictions, allergies, medications taken by the child, or any other needs, are noted below.*
 My/our child carries an epi-pen. I am attaching an allergy action plan.

- Field Trips.** I/we on our behalf and on behalf of the child(ren) identified above hereby release Gretchen's House Inc. and its employees, agents, representatives and assigns, from responsibility or liability for any damages arising from personal injuries, property damage, or loss relating to the participation of the child(ren) listed above in any activities taking place off the immediate premises of Gretchen's House. Such off-premise sites may include, but are not limited to, field trips, museum visits, public or private swimming pools being visited under supervision, library visits, and other similar activities. This is a release not only of our own rights as (father, mother, guardian), but also the rights of our minor (son, daughter, ward). I/we recognize that off-premise activities are optional, extra activities being made available to the participating children, which can be undertaken only if we assume and provide for any risk of injury through our own insurance, or otherwise. The undersigned agree to secure our own insurance coverage if we elect to do so. This consent to the children's participation in such off-premise activities and waiver/release of liability shall be effective and binding unless and until written advance notice or revocation is delivered to Gretchen's House Inc., 4531 Concourse Drive, Ann Arbor, MI 48108. I/we verify that the above child(ren) have no physical handicaps or impairments that might inhibit participation in such activities, except as listed in comments section below. *

- Directory.** I/we give permission to Gretchen's House to publish our names, address, and telephone number in a center directory to be distributed to Gretchen's House parents and staff.

- Sunscreen.** I/we give permission for caregivers of Gretchen's House to apply, sunscreen, bug repellent, and calamine lotion.

- Swim Test.** I/we I give permission for me/our child to take the swim test at the public pool. If s/he passes the test, I/we give permission for him/her to swim in the deep end of the pool with Gretchen's House SCamp.

*Comments (if any) _____

Parent Signature(s) _____ Date _____
 _____ Date _____