

Notes By Amy
Summer Performing Arts Explosion 2011
Medical Release and Sign Out Form

Name: _____

Health Card Number: _____

Release:

I hereby release Notes By Amy from all claims for damages arising from any accidents or injury which arise from my child's participation in the "Summer Performing Arts Explosion 2011."

In the event of an accident or illness involving my child when I or my emergency contact are not immediately available, I hereby authorize the administration of any medical procedure deemed necessary by the physician selected. I also give permission for my child to be transported to the hospital or for an ambulance to be called.

Parent Signature: _____

Daily Sign Out Form:
(to be signed out at the camp each day)

<i>Signature:</i>	<i>Date:</i>
	<i>July 18, 2011</i>
	<i>July 19, 2011</i>
	<i>July 20, 2011</i>
	<i>July 21, 2011</i>
	<i>July 22, 2011</i>