



Liberty Camp Geauga

Liberty Camp Geauga 2020 Teen Patriot Registration

(Entering 8th grade through college age)

<<<<< Please print clearly >>>>>

PARENTAL/GUARDIAN INFORMATION

Last Name _____ First Name _____

Address _____ PO Box _____ City _____ Zip code _____

Email Address _____

Contact # _____ Cell ___ Home ___ Work ___ Other # _____ Cell ___ Home ___ Work ___

EMERGENCY CONTACT INFORMATION (if different than above)

Name _____ Contact # _____ Cell ___ Home ___ Work ___

Relationship _____ Alternate # _____ Cell ___ Home ___ Work ___

PHOTO RELEASE

Please read the following photo release

As the parent/guardian checking "I agree" constitutes your legal waiver as written.
All registrants must have a signed Photo Release to attend Liberty Camp Geauga 2020.

I hereby authorize the Liberty Camp Geauga 2020 and the Liberty Camp Geauga staff to use, reproduce and/or publish all written and/or visual materials, including photographs and video that may pertain to me or my children. I understand that this material may be used in various publications, public affair releases, recruitment materials, or for other related endeavors. This material may also appear in newspapers, on the Liberty Camp Geauga website and/or Face book pages. This authorization is continuous and may only be withdrawn by my specific rescission of this authorization. Consequently, Liberty Camp Geauga 2020 and Liberty Camp Geauga staff may publish materials, use my name, my children's first names, photographs, video and/or make reference to same in any manner that is deemed appropriate in order to promote/publicize the event/program.

___ **I agree** with the photo release statement above.

Parent/Guardian Full name printed: _____

Parent/Guardian Legal Signature: _____ Date: _____

LIABILITY WAIVER

Please read the following waiver of liability

As the parent/guardian checking "I agree" constitutes your legal waiver as written.
All registrants must have a signed Liability Waiver to attend Liberty Camp Geauga 2020.

I certify that I have adequate accident Insurance and I will not hold Liberty Camp Geauga 2020, its Leaders, Staff or Volunteers liable for any and all claims related to participation in this program.

___ **I agree** with the waiver release statement above.

Parent/Guardian Legal Signature: _____ Date: _____

1st TEEN PATRIOT INFORMATION

Last Name _____ First Name _____ Nickname _____

Gender> Male__ Female__ Birth date___ / ___ / ___ Grade (school year 2019/2020)/Age_____

T-Shirt Size> **YOUTH**< **M** (10-12)___ **L** (14-16)___ **ADULT**< **S**___ **M**___ **L**___ **XL**___

Allergies/Health Concern we should be aware of in camp: (Write "None" if there aren't any)_____

Hobbies, Interests, Skills_____

Previous Volunteer Experience_____

Extra Curricular Activities_____

What type of volunteer work interest you? (i.e. supervising younger children, assisting group leaders, playing the role of a colonist, etc)? Please list and explain.

What type of transportation to camp do you have available: parent, guardian, friend, other_____

Teen Patriot Agreement: By submitting this application, I affirm that the facts set forth in my application

for volunteering are true and complete. All the information recorded above is considered confidential.

Applicant Signature_____ Date:_____

Parent Signature_____ Date:_____

2nd TEEN PATRIOT INFORMATION

Last Name _____ First Name _____ Nickname _____

Gender> Male__ Female__ Birth date___ / ___ / ___ Grade (school year 2019/2020)/Age_____

T-Shirt Size> **YOUTH**< **M** (10-12)___ **L** (14-16)___ **ADULT**< **S**___ **M**___ **L**___ **XL**___

Allergies/Health Concern we should be aware of in camp: (Write "None" if there aren't any)_____

Hobbies, Interests, Skills_____

Previous Volunteer Experience_____

Extra Curricular Activities_____

What type of volunteer work interest you? (i.e. supervising younger children, assisting group leaders, playing the role of a colonist, etc)? Please list and explain.

What type of transportation to camp do you have available: parent, guardian, friend,
other _____

Teen Patriot Agreement: By submitting this application, I affirm that the facts set forth in my
application

for volunteering are true and complete. All the information recorded above is considered
confidential.

Applicant Signature _____ Date: _____

Parent Signature _____ Date: _____