



Camp Shaw-Waw-Nas-See Activity Permission Form

By signing this form I acknowledge that I have taken the time to familiarize myself with the programs offered by Camp Shaw-Waw-Nas-See. I understand that there are potential hazards and dangers in the camp activities. I acknowledge that although Camp Shaw-Waw-Nas-See has taken safety measures to minimize the risk of injury to participants, Camp Shaw-Waw-Nas-See cannot insure or guarantee that participants, equipment, premises and/or activities will be free of hazards, accidents or injuries. I give permission for the name below to participate freely in all camp activities.

I have listed, on the back of this agreement, activities that the name stated below cannot participate in while at Camp Shaw-Waw-Nas-See.

In addition, I understand that while at Camp Shaw-Waw-Nas-See, staff may take photos and/or videos of the name stated below to be used for marketing efforts to help further the mission of Camp Shaw-Waw-Nas-See.

Participant Name: _____

Today's Date: _____

Participant Signature (if over the age of 18)

Parent/Guardian Signature (if under the age of 18)