



# Program Participant Permission Form

Community: \_\_\_\_\_

All youth participants **MUST** have a completed permission form to attend Camp Fire program

Camp Fire has contracted with a local partner to provide a summer recreation program to the community's youth. The program is open to all youth who want to participate ages 5-17. Youth under age 5 must be accompanied by a chaperone.

Participant Information:	
Child's Name: (First and Last)	Age:
Parent/Guardian Name: (First and Last)	Gender:
Names and ages of siblings in program:	Phone #:

**For the Parent/Guardian:**

I hereby give my child/dependent permission to:

- Attend the Camp Fire program. This is an open program for youth to come and go as they please.
- Participate in a range of programming activities including but not limited to cooking, outdoor recreation, swimming, arts and crafts, meals, community events, and activities which may involve boating or hiking.
- Be photographed or recorded while participating in activities and have photos or video/audio recordings used in future publications by Camp Fire Alaska, The Alaska Native Tribal Health Consortium, or the Yukon-Kuskokwim Health Corporation and other partners (see reverse for opt-out release).

To the best of my knowledge, my child/dependent is in good health and has no illness, communicable diseases, or disability/condition that will interfere with the camp experience. I also understand that if it becomes necessary, my child may be asked to leave the program.

\_\_\_\_\_  
**Parent/Guardian's signature**

\_\_\_\_\_  
**Date**

**For Participants:**

The Camp Fire staff ask that you review the following guidelines and sign to show that you agree with and support Camp Fire with these responsibilities:

- I will display respectful behavior towards other youth, Camp Fire leaders, Elders and visitors.
- I will respect the person and property of other individuals, Camp Fire, and the Community when participating in the Camp Fire program.
- I will respect and protect all of Camp Fire's and the Community's facilities and property.
- I will cooperate with Camp Fire leaders at all times, including participating in meals, scheduled activities, and field trips.
- I will not possess or consume alcohol, inhalants, tobacco, marijuana, or other drugs. I will not possess firearms, weapons, hazardous materials or animals in program.
- I understand if I were to break any of the above expectations, I may be asked to leave the Camp Fire program.

\_\_\_\_\_  
**Youth/Participant Signature**

\_\_\_\_\_  
**Date**