



Trail Blazers  
250 W 57<sup>th</sup> Street, Room 1132  
New York, NY 10019



**READ CAREFULLY: you will have TWO date options for Spring Camp this year, please be sure to choose and circle the dates that your child is out of school:**

Spring Camp will be during the spring recess break: **NYC students- 3/30-4/1. NJ students - 4/6-4/8.** We only have 30 spots available for each trip so if we have enough campers interested, we will confirm the dates and inform you. Final dates, pick up locations and a clothing list will be posted online 1 week before the weekends take place and emailed to you.

**SPRING CAMP PERMISSION FORM - Spring Camp -- cost \$ 75 -- takes place at camp in New Jersey.**

This form MUST be in the office by the 1<sup>st</sup> day of the trip.

CHILD'S NAME \_\_\_\_\_ PARENTS/GUARDIAN'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE # ( \_\_\_\_\_ ) \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ PHONE #( \_\_\_\_\_ ) \_\_\_\_\_

EMAIL: \_\_\_\_\_ (this is how we will communicate with you.)

\_\_\_\_ Yes, at the end of the weekend I will pick up \_\_\_\_\_ at the Trail Blazers Office (250 W 57th Street Room 1132, New York, NY).

\_\_\_\_ No, I will not be able to meet \_\_\_\_\_ at the Trail Blazers Office. I give permission for him/her to travel home on public transportation and understand that Trail Blazers' responsibility ends once she/he leaves the office (for 12 year olds and up).

**PLEASE READ THE FOLLOWING CAREFULLY AND SIGN:**

*I understand that the normal rules that are used at Trail Blazers in the summer will be used at Spring Camp. I agree to live by those rules and this means:*

- I will do my share of the jobs.
- After taps, I will be quiet and not talk or make noise
- I will eat at least three bites of any food that is served
- I will listen to and follow instructions from my group leaders and other staff
- I will not hit or physically hurt any one.

CHILD'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

1. I give consent for my child to attend the Spring Camp at Trail Blazers.
2. I give permission for my child to participate in all program activities, including but not limited to swimming, biking, hiking, fire building, outdoor exploration, outdoor cooking, arts and crafts , back packing and challenge course
3. Trail Blazer Camps is not responsible for lost, stolen, or damaged personal articles.
4. My child will follow all camp guidelines for standards of behavior. Noncompliance may involve appropriate disciplinary action, including possible dismissal.
5. Photographs and or video footage taken of participants at Trail Blazers may be used for publicity purposes.
6. I understand that Trail Blazers will make every effort contact me in case of an emergency. In the event I cannot be reached and my emergency contact cannot be reached, Trail Blazer Camps has permission to secure proper medical treatment.
7. I agree that measures (including but not limited to hospitalization, anesthesia, surgery, or injections of medication) be instituted for my child without delay as judgment of medical personnel dictates.
8. I give permission to the physician selected by Trail Blazers' staff members to administer any medications, order x-rays, routine tests and treatment for the health of my child. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by Trail Blazer's staff members to hospitalize, secure proper treatment for, and order injection and/or anesthesia and/or surgery for my child as named herein.
9. I understand and acknowledge that Trail Blazer Camps is released from liability for any injury, loss or damage connected in anyway with my child's participation in the Trail Blazer Day Camp Program. I understand that this release includes any claims based on negligence, action or inaction of Trail Blazer Camps, its staff, directors, members or guests.

PARENT/GUARDIAN'S SIGNATURE \_\_\_\_\_ DATE: \_\_\_\_\_

- **PLEASE SEND IN SPRING CAMP PAYMENT WITH THIS PERMISSION SLIP**
- **Placement is not guaranteed without payment. Payment is not refundable.**