PARKLANDS CAMP PERMISSION FORM*

Child's Name:	
I, give permission (parent/guardian full name)	for to
(parent/guardian full name)	(child's full name)
participate in the 21st Century Parks, Inc. Camp Program that the child named above must follow all rules and reginherent risk is associated with all outdoor activities incleaneing/kayaking, wading, and fishing. All of these acticonditions and weather. I further agree to release and and all claims of bodily injury, sickness, disease or death to my child that might occur during this program.	gulations stated by 21st Century Parks, Inc. uding but not limited to hiking, biking, archery, vities can be adversely affected by trail nold harmless 21st Century Parks, Inc., from any
Signature	Date
Relationship to Child	
Emergency Contact # () -	
In case of emergency, The Parklands Education & Interp Hynes, will be on hand at The Parklands. The Education 0274 during regular operating hours or by contacting th 1008.	team can be reached daily by calling (502) 815-
*This is a required document; child will not be admitted	to program without this completed form