Camper's Info		
		DOB:
First	Last	
Legal Guardian	Name(s):	
Picl	Compared to the compared to	horization Form
Please list <u>yourself</u> and their up-to-date cellpho	<u>all persons</u> that will be dropping off or pic ne numbers. All persons listed here will be re	eking up your camper for the summer and include equired to present a picture ID when picking your sons not listed here will not be allowed to take your
rst Name	Last Name	Phone Number
rst Name	Last Name	Phone Number
rst Name	Last Name	Phone Number
	Please add names as they appear on	driver's license.
Pad	ucah Parks & Recreati	on Camp Waiver
I understand that participate unless accident which most the event. I als	this event is potentially hazardous, and that I medically able and properly trained. I assume ay occur while traveling to or from the event, o am aware of and assume all risks associated with other campers, effects of weather, traffic a	(or my camper) should not enter and e full responsibility for any injury or , during the event, or while on the premises d with this event, including but not limited
liability arising of	he City of Paducah, Paducah Parks & Recreat ut of my or my camper's participation in this aused by negligence or the action or inaction	event. This waiver includes any and all
	grant full permission to use any photographs, ecordings or any other record of this event.	videotapes, motion pictures, website
	grant permission to use any photographs, videos or any other record of this event.	otapes, motion pictures, website images,
 Parent/Guardiar	Signatura	——————————————————————————————————————