



Summer Adventure Daze

Please complete this registration form and the attached waiver form.

Name _____
Address _____
City _____ State _____ Zip _____

Student Birthdate _____ Grade Entering _____

Date(s) Attending: _____

Parent(s)/Guardian(s) Name _____
Cell Phone _____
Email _____

Who can drop off and pick up your child? _____

Can you provide lunch and snacks for your child? **YES** or **NO** (Circle One)

Please make sure that your child has a reusable water bottle with him/her at all times. We will always have water available to refill bottles. We will not provide, nor do we recommend, sugary, caffeinated, or carbonated drinks.

Interacting with peers, leaders, and nature is very much a focus of this intensive. Cell phones may be used at times for photography activities, but will not be available at other times to the campers. If you need to communicate something to your child or vice versa, please use the following numbers and store them in your phone:

Zac- 706.968.5692
Katherine- 706.968.5879
The Adventure Store- 706.839.7195

Emergency Contact Info (NOT a
parent/guardian)
Name _____

Phone _____

Emergency Contact Info (NOT a
parent/guardian)
Name _____

Phone _____

Insurance Information (Please attach a copy of insurance card)

Insurance Company _____

Policy Holder's Name _____

Policy Number _____

Please let us know of any medication/allergy/diet needs your child has.

(All medicine must be brought in original container.)

For certain activities we will be traveling to other locations in Habersham County. Do you give permission for your child to leave The Adventure Store on foot or in the van to these locations? There will also be separate waivers to sign for companies that are using.

YES or **NO** Parent/Guardian Signature _____

(Circle One)

Media Statement: I grant permission to The Adventure Store to record, by videotape, photograph, or other means of reproduction, the voice, image, and physical likeness of my camper and to use any such recorded material for promotional and marketing purposes, such as printed brochures, social media websites, without further consent or compensation. Do you agree to the media statement above?

YES or **NO** Parent/Guardian Signature _____

(Circle One)

Any other important information we should know about your child.
