## Newtown History Camp 2024 - Application

2024 Consent form for the Newtown History Camp - Fill out this form and then follow instructions at the end of the application to reserve your child's spot in this year's camp. \*NOTE: A separate consent form is required for each child\*

| * Indicates required question |   |     |  |
|-------------------------------|---|-----|--|
|                               |   |     |  |
| 1.                            | Email *   |     |  |
| P                             | arent Information                                 |     |  |
| 2.                            | Parent/Guardian Name (First & Last): *            |     |  |
| 3.                            | Parent/Guardian Address (Street, City, State, Zip | ) * |  |
| 4.                            | Parent/Guardian Contact Phone Number: *           |     |  |
| 5.                            | Parent/Guardian Alternate Phone Number: *         |     |  |
| 6.                            | Parent/Guardian Email Address: *                  |     |  |
| С                             | hild Information                                  |     |  |
| 7.                            | Child's Name (First & Last) *                     |     |  |

| 8.  | Child's Age: *  |
|-----|---|
| 9.  | Has your child previously attended Summer History Camp? If so, what year? * |
| 10. | Child's Address (If different from above): *                                |
| Ju  | est In Case   |
| 11. | Child's physician (Name & Phone number) *                                   |
|     |   |
| 12. | Is your child taking any medication? If so, please list here. *             |
| 13. | Does your child have any allergies? If so, please list here. *              |
|     |   |

| 14. | If parent/guardian is unavailable, whom should we contact? (Please include: Name, Relationship to Child, and Phone number)   |
|-----|--|
|     |  |
|     |  |
|     |  |
|     |  |
| 15. | Should an emergency arise, all efforts will be made to contact the parents or other person(s) so designated. However, I, the parent/guardian, authorize the staff to administer first aid should it become necessary while my child is in their care. I hereby also authorize the staff to remove my child from the premises in a medical emergency. |
|     | Check all that apply.  |
|     | YES (Parent/Guardian) authorization  |
| Su  | mmer Camp Basics   |
| 16. | We appreciate that children, like adults, have good and bad days. That said, we do not tolerate inappropriate, disrespectful, or dangerous behavior, and we reserve the right to dismiss any camper who violates this basic standard. Agreed?  |
|     | Check all that apply.  |
|     | YES (Parent/Guardian authorization)  |
|     |  |
| 17. | Historical objects are unique. In the event your child's behavior directly or indirectly results in damage to any item owned or held by the Newtown Historical Society, do you promise to pay for it, or, if possible, replace it?   |
|     | Check all that apply.  |
|     | YES (Parent/Guardian authorization)  |
|     |  |
| 18. | We may want to use photographs and/or video from this year's Summer History Camp on our website, socials, and/or in promotional materials submitted to media outlets. Do we have your permission to use photos and/or video that includes your child?  |
|     | Check all that apply.  |
|     | YES (Parent/Guardian authorization)  |

## Legally Enforceable Promises

| 19. | I hereby give permission for my child to attend Newtown Historical Society's Summer History Camp ("History Camp").   |
|-----|--|
|     | Participation in any program that involves physical activity exposes the participant to certain risks and dangers. Accidents and injuries are always a possibility, and it is impossible to foresee and protect the camper from all conceivable dangers.   |
|     | I hereby affirm that my child has no condition(s) that would make it unsafe for him/her/them to participate in the camp's programs.  |
|     | I understand that the Historical Society may exclude my child from camp in the event that I and/o my child fail to abide by the camp's health and safety protocols, disrupt, impede, or interfere with operations of the camp, or threaten the health, safety, or welfare of other participants or camp staff, and that no refunds of any fees will be made in such circumstances. |
|     | Check all that apply.  |
|     | Yes, I agree (Parent/Guardian authorization)   |
| An  | d Finally  |
| 20. | When you submit this form by clicking the button below, we promise to review your registration form in the order it was received by this automated website. We also promise that one of our human beings will contact you as soon as possible to acknowledge its receipt, and to let you know whether we are able to accommodate your child in our 2024 summer session. Ok?        |
|     | Check all that apply.  |
|     | YES (Parent/Guardian authorization)  |
|     |  |
| 21. | If our Summer History Camp (Aug 19-23, 2024) is full, would you like us to place your child on a waitlist?   |
|     | Mark only one oval.  |
|     | Yes  |
|     | ◯ No   |
|     |  |
|     |  |