

# AUTHORIZATION FORM

(must be filled out and returned before the beginning of the camp)

## The legally responsible person:

I, undersigned (name), \_\_\_\_\_ authorize my child,

- To participate in all camp activities (swimming, hiking, sports, etc.)
  - To participate on the service team as needed
  - To receive necessary care (medical and other) in an emergency
  - To be transported in camp vehicles
  - I authorize Camp des Cimes to use photos, slides, videos... on which my child may appear for promotional purposes of the activities organized by the association.
- (Mark the circle when you give your authorization)

Date:

Signature:

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## The participant:

I, undersigned (name) \_\_\_\_\_ declare,

- To be interested and motivated in the nature of this camp,
- To commit to respect the rules of the camp (respect of the individuals, of the property and facilities, of the security guidelines and other rules for community life)

Date:

Signature: