## MIDSOUTH DISTRICT CHILDREN'S CAMPS NOTARIZED CAMPER FORM

Campers' Name(s):			
	Medical Treatment Release	e	
and all claims against the MidSouth District	validate with my signature th Church of the Nazarene and a r damage to person or propert	is registration form and do expressly waive	
	Photo Use Release		
"I hereby give permission for my child's or on camp websites and social media platfor images are shown." Initial here to deny pho	ms. For privacy reasons photog	t camp, in publications, in news releases, argraphs will not identify the people whose	nd
	Transportation Release		
-	ansportation of the child. I und	ounds, by someone other than a parent, the derstand that only persons listed will be able ed before allowing any child to leave."	
"I hereby authorize the following persons t should it become necessary."	o pick up the child named on t	this registration form from Camp Garner Cre	eek,
Name	Relationship to o	child	
1			
2			
My child will be traveling to/from camp by	transportation provided by	COTN	
Your child will not be eligible for early relea counselor or director or nurse has signed of	•	been completed, I.D.s have been checked, ar	nd
I have read the camp rules and agree to abide	by them. I understand that if I do	o not obey the rules, I may be sent home.	
Camper Signature:			
Parent/Guardian Signature:		(must be signed in the presence of a Notary Pu	ıblic)
		is day of, 20 and acknowledged execution of the forego	
•	•		
State/Province of: Co	unty of:	My Commission expiration date: /	,