

LAUNCH

2020 summer yearbook camp



Jostens®

PERTINENT INFORMATION & MEDICAL RELEASE

School Name: _____

Attendee Name: _____

Shirt Size: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Emergency Contact Address/City/St/Zip: _____

Please list any pertinent medical information applicable to allergies, nervous disorders, heart trouble, diabetes, epilepsy, etc... _____

Date of last tetanus shot: _____

Please include any additional information which you feel may be pertinent to the individual's safety while he/she attends yearbook camp on a separate sheet of paper and attach it to this medical release form.

This medical form MUST be signed by a parent/guardian before registration can be accepted. In the event of emergency, illness or accident, this form authorizes the administration of medical/surgical treatment as deemed necessary by a licensed medical doctor for the individual named. Should religious or other considerations prevent such permission, the individual must present, in lieu of this form, a statement absolving Belmont University and the Jostens Yearbook Workshop of any medical liability. Information contained herein will remain confidential.

Parent/Guardian Signature

Date