

Please print legibly.

CAMPER NAME: _____
Last First

Social Security Number
(last 4 digits ok)

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OR

Delgado Non-Credit Student ID Number

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STREET ADDRESS: _____

CITY: _____

STATE: _____

ZIP CODE: _____

GENDER: Male Female

DATE OF BIRTH: ____/____/____

ETHNICITY: American Indian/Alaskan
(optional) Asian/Pacific Islander

Black, not Hispanic
 Hispanic

White, not Hispanic
 Other _____

CAMP TITLE	DATES	TUITION
		\$
		\$

Parent/guardian name (1):

Email address: _____ Home number: _____ Cell number: _____ Work number: _____

Parent/guardian name (2):

Email address: _____ Home number: _____ Cell number: _____ Work number: _____

Additional contact name:

Email address: _____ Home number: _____ Cell number: _____ Work number: _____

PAYMENT & REFUND POLICIES

- 100% refund is automatically processed if camp is cancelled by Delgado or if camper drops the camp. (See restrictions below.)
- All requests to be dropped from a camp must be submitted in writing at least five (5) business days prior to the camp's start date.
 - No refunds will be given for removal from the program due to violations of the Camper's Code of Conduct.
- No drop requests will be granted after any camp begins.
 - Up to six weeks might be required to process any refund.

REGISTRATION IS NOT GUARANTEED WITHOUT PAYMENT.

Camp registration is subject to cancellation if payment is not received by June 16, 2017.

FOR OFFICE USE ONLY

/ Student Added By / Date	/ Student Registered By / Date	Received by: <input type="checkbox"/> Walk-In <input type="checkbox"/> Email <input type="checkbox"/> Drop-Off <input type="checkbox"/> Fax <input type="checkbox"/> Mail	Date:
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Continuing Education & Professional Development

2019 SUMMER CAMP CONSENT FORM AND RELEASE OF LIABILITY

Name of camper: _____

RELEASE AND LIABILITY WAIVER: This is a legally binding Consent Form and Release of Liability made voluntarily by me, the undersigned Releasor, on my own behalf, and on the behalf of my heirs, executors, administrators, legal representatives and assigns to the Louisiana Community and Technical College System and its institution, Delgado Community College (hereinafter "DCC").

By the execution of this waiver of liability form, I acknowledge that the camper listed below is capable of participating in the activities. I also assume all risks of the camper participating in the activities, whether such risks are known or unknown to me at this time. I release and hold harmless this organization, leaders, volunteers, and any agents from any claim the student or I may have due to the result of any injury or illness incurred during participation in the DCC Summer Camps. I accept and assume full responsibility for any and all injuries, damages, and losses that may occur to the camper from any participation in the camp activities.

It is my understanding that the camper participating in Summer Camps through DCC Continuing Education is a privilege. I acknowledge that participation in these activities may inherent certain risks, including physical injury due to activity related accidents, illness, or even death. I also understand that there may be other risks due to these activities that I may not be aware of at this time.

In an emergency, I acknowledge that I am solely responsible for all medical and other costs arising out of bodily injury or any loss sustained through participation in this activity. I authorize program staff to secure any licensed hospital, physician and/or medical personnel for any treatment deemed necessary for the participant's immediate care.

Please list specific medical allergies, chronic illnesses, dietary restrictions, or other conditions that will impact participation in camp:

Does the camper take any medication on a regular basis? Yes No

If yes, list medication(s):

CAMPER'S CODE OF CONDUCT: Disciplinary action may be imposed whenever a student commits or attempts to commit any act of misconduct on the DCC campus, or at any activity, function, or event sponsored or supervised by DCC, including but not limited to:

1. Possession, use or distribution of an illegal or controlled substance, or look-alike drug.
 2. Unauthorized and/or illegal possession, use or distribution of any alcoholic beverage.
 3. Theft of property or services.
 4. Intentional or willful and wanton destruction of property.
 5. Assault and/or battery.
 6. Possession of a weapon.
 7. Conduct which constitutes harassment or abuse that threatens the mental well-being, health, or safety of an individual. Consequences include, but are not limited to, time out, notifying parents, and removal from the program for the safety and well-being of other campers.
- Disciplinary action may also be imposed whenever a student commits any acts of misconduct during an off-site event or activity.

PUBLICITY/PHOTOGRAPHY RELEASE: I give permission to use the student in either photographs or video materials for future promotion of Delgado summer camps. The camper will not be identified by name in these materials without my consent. *check to opt out*

By signing below, I also acknowledge the following:

- I authorize DCC staff to administer immediate and emergency medical treatment, including (1) transporting my child to a hospital emergency room or (2) calling the local rescue squad or ambulance.
- For my camper's safety, s/he cannot arrive earlier than 15 minutes before camp start time each day, and must be picked up no later than 15 minutes after camp end time each day.
- I/we prefer to have an authorized person (listed on registration form) sign out my camper each day from the classroom. Yes No

Signature of Parent/Guardian (Releasor): _____

Date

Printed name of Parent/Guardian

(Releasor): _____

