

## **Camp Summerset Liability Release and Off Campus Permission**

### Liability Release

I assume full responsibility for my child's participation in Camp Summerset, and I release Camp Summerset and the Somerset Elementary School, the Somerset Elementary PTA, its directors, instructors, counselors, and counselors-in-training, from all liability connected with my child's participation, including offcampus activities.

The participant consents to Camp Summerset's use of any photographs made during the program.

If my child will be absent or needs to leave an activity early, I will notify the Camp Directors. Neither the instructors nor any of the staff are responsible for campers prior to or after the scheduled program.

I authorize camp officials to administer first aid and/or take my child to a physician or hospital for emergency treatment in the event it appears necessary and neither parent or provided emergency contact can be contacted.

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Signature of Parent/Guardian

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Date

CONFIDENTIAL

**REQUIRED FORM PLEASE COMPLETE AND SIGN!**