

CAMP TAHQUITZ
PARENT CONSENT/MEDICAL RELEASE

TO WHOM IT MAY CONCERN:

I hereby make application for Scout_____ of Troop_____ for a place at CAMP TAHQUITZ SUMMER CAMP. Said member is amenable to such rules and regulations as may be made by the Executive Board, Camp Director, or its representatives. I give permission for my son to attend and participate in all summertime activities at Camp Tahquitz.

It is expressly understood by the parents or guardians that the member for whom this application is made is in a condition of health that warrants his taking part in the event, and that the leader of this outing is hereby granted permission to take the named member to a medical doctor for examination and treatment of any accident or illness that may arise during the term of said outing. (See authorization below)

I understand that promotional pictures may be taken during camp activities. I authorize the Long Beach Area Council, Boy Scouts of America, and the National Council, Boy Scouts of America, to use photography or video images of my child for promotional purposes.

AUTHORIZATION TO CONSENT OF TREATMENT OF MINOR

I/We, the undersigned parent(s)/guardian(s) of (FULL NAME)_____ minor, do hereby authorize the Long Beach Area Council Camp Director or his designate as agent(s) for the undersigned to consent to any X-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of, any physician or surgeon licensed under the provision of the Medicine Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care that the aforementioned physician, in the exercise of his best judgment may deem advisable.

This authorization shall remain in effect for the dates of the event given below.

PLACE: CAMP TAHQUITZ DATES: FROM _____ TO _____

PARENT/GUARDIAN _____ WITNESS _____
(Please print)

SIGNED _____ Date _____ SIGNED _____ Date _____

HOME PHONE NUMBER _____ BUSINESS PHONE NUMBER _____

EMERGENCY PHONE NUMBER IN THE EVENT THAT PARENT/GUARDIAN CANNOT BE CONTACTED:

NAME _____ RELATIONSHIP _____ PHONE _____

OPTIONAL Permission for use of Firearms

California Penal Code Section 12552 prohibits furnishing firearms to minors 18 without the express or implied permission of the parent/guardian of the minor. Understanding this, I give my permission for _____ to use a firearm at Camp Tahquitz.

SIGNATURE OF PARENT/GUARDIAN _____ Date _____

Staff member's name: _____

CAMP TAHQUITZ STAFF
MINORS LEAVING CAMP

During the week (from Sunday 10:00 am through Friday 10:00 pm), staff members are not allowed to leave camp or the general Barton Flats area. However, sometimes the staff is invited to other camps to play water polo, volleyball, or simply to interact with other cam staffs.

On some weekends, there may be an official camp-sponsored event where the camp will take staff members down the hill for an activity – to see a movie (PG13 or less!), play miniature golf, have pizza, etc. These activities are considered official camp events, and follow all appropriate BSA policies on adult supervision, youth protection, etc.

Since we have staff members with vehicles at camp, there are times when a staff member will want to “go down the hill” on a weekend for a non-camp sponsored event – e.g., he and a few friends may want to see a movie on their own during the weekend (not on weeknights)

Finally, staff members are free to go home on weekends. Often parents will carpool and share the joy of driving up and down the hill.

So that we can reinforce any agreements that you made with your son, **please indicate which activities you son IS allowed to participate in:**

My son may:

_____ Drive/ride to events at other camps in the Barton Flats Area

_____ Walk to events at other camps in the Barton Flats Area.

_____ Drive/ride to the Redlands/San Bernardino area on official, camp-sponsored staff activities

_____ Drive/ride to the Redlands/San Bernardino area on unofficial, non-camp sponsored activities (eg, a few friends drive into Redlands to see a movie). While this is a non-camp sponsored activity, staff members must still adhere to the BSA and camp driving policy which prohibits minors from driving other minors.

_____ Drive/ride home on the weekends with another staff parent.

_____ Drive/ride home on the weekends with another staff member. (BSA policy prohibits minors from driving other minors.)

Please indicate any restrictions that you have given your son (e.g., are there any persons whom he is NOT to be driven with, or are there any weekends when he is NOT to come home).

I have discussed these restrictions with my son.

Signature of parent

Date

Phone

I am aware of my parent's directives on leaving camp:

Signature of staff member

Date