

Please fill out the following information

Name: _____

Age/ Date of birth: ____ / _____

Parent/ Guardian Email: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone number: _____

Adult t-shirt size: S M L XL XXL

Camp interest (please circle one):

Middle School

High School

Medical History

Do you have any allergies? If so, please list:

Do you have asthma? _____ If so, do you carry an inhaler? _____

Where? _____

Do you have any other medical issues we should know about? (epilepsy, anemia, etc?) _____

Are you allergic to bees or nuts? _____

If so, do you carry an Epi-Pen? _____ Where? _____

Emergency Contacts

Who should we contact in case of an emergency?

First

Name: _____

Phone: _____ Work phone: _____

Cell phone: _____

Relationship: _____

Second

Name: _____

Phone: _____ Work phone: _____

Cell phone: _____

Relationship: _____

What is your **adult** t-shirt size? S M L XL

Mail or Fax your application to:

Oregon Tradeswomen, Inc.

1714 NE Alberta St., Portland 97211 or FAX: 503-249-0445

Attention: Ashley

Building Girls Summer Camp is a **free**
program

Please see back

YOUTH INFORMATION

Child's Name _____

Child's Age _____ Gender (optional) _____ Ethnicity (optional) _____

Child's School/Organization _____

Parent/Guardian's Name _____

Address _____

City _____ State _____ ZIP _____

Parent/Guardians Phone Numbers (in case of emergency)

Home _____ Work _____ Cell _____

RELEASE OF LIABILITY FOR CHILD

(Read Before Signing)

In consideration of the participation of my child named below in Oregon Tradeswomen Inc.'s activities, I, _____, the undersigned acknowledge and agree that:

1. There is risk involved in the activities offered, and
2. I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release and hold harmless Oregon Tradeswomen, Inc. for any and all liabilities incident to my child's involvement and participation in this event, and
3. I have read this release of liability, fully understand its terms, and sign it freely and voluntarily.

Parent/Guardians Signature _____ Date _____

STUDENT PHOTO/VIDEO RELEASE FORM

Oregon Tradeswomen, Inc. may take photographs, for use in publications, videotapes, and other materials to promote the after school program, Building Girls Camp, the Women in Trades Career Fair and other activities of Oregon Tradeswomen, Inc., and to inform interested parties about such activities.

I, the parent (or legal guardian) of the below-named student , consent to the use of the student's likeness and/or voice in such publications, videotapes, or other materials and releases and discharges Oregon Tradeswomen, Inc., its agents and consultants, directors, employees, volunteers, and officers from all claims for loss, damage, injury, or expense arising from such use.

Parent/Guardian Signature _____ Date _____