



SUMMER CAMP REGISTRATION AND WAIVER

2015 DATES – circle your choice: 5-day: August 3-7
4-hour: July 1 July 15 July 29 August 12

*Please print and complete. Each passenger must turn in this form before boarding the boat.
Waivers for participants under age 18 must be signed by a parent or legal guardian.*

Camper's name _____ Age _____

Known allergies or medical conditions _____

Parent or emergency contact _____

Emergency contact home phone _____ cell _____ work _____

Emergency contact address _____

Physician name and phone _____

Medical Release

I hereby give permission for Gundalow Company staff and/or any adult member of the participating group to transport myself/my child to a doctor and/or hospital for treatment. I authorize all medical, surgical, diagnostic and hospital care procedures which may be performed or prescribed for myself or my child by a licensed physician or hospital, when efforts to contact me are unsuccessful, and when deemed immediately necessary or advisable by the physician to safeguard myself or my child. I waive my right of informed consent to such treatment. *If, for religious or other reasons, you wish NOT to authorize treatments, please attach an explanation.*

Photo Release

I hereby give permission for Gundalow Company staff and/or any person acting on their behalf to photograph myself/my child and I allow Gundalow Company to use these photographs as it sees fit. I release all publication rights to said photos. *If you wish NOT to authorize release of photos, please attach an explanation.*

Participation Release

I acknowledge that I have voluntarily chosen and HEREBY GIVE permission for myself/my child to participate in a program conducted by Gundalow Company. I hereby certify that I am cognizant of the inherent dangers of sailing, water-related activities and shore-based programs and I hereby assume such risks. I HEREBY UNDERSTAND AND AGREE that Gundalow Company, its owners, directors, officers, operators, agents, employees, instructors, staff and crew – together with other unnamed assistants, shall not be held liable in any way for any occurrence in connection with any accident, injury or occurrence to myself or to the above named participant in connection with the activities of Gundalow Company unless the same is as a result of the negligence on the part of the above referred entities and persons. I further hereby waive and release any claim for personal injury or death against the above referred entities and persons and any and all damages to me, the above named participant, my estate, my family, heirs and assigns. In consideration of myself or the above named participant being allowed to participate in the activities of Gundalow Company, I hereby personally assume all risks in connection with said activities, whether foreseeable or unforeseeable and further, to save and hold harmless said program, entities and persons from any claim by me, the above named participant, our families, estates, heirs and/or assigns arising out of my or the above named participant's enrollment and participation in this program. I further agree to indemnify Gundalow Company for all claims, demands, costs and/or judgments arising out of my own acts or omissions arising from my participation. I further state that I am of lawful age and legally competent to sign this affirmation and release; that I understand the terms herein are contractual and not a mere recital; and that I have signed this document as my voluntary act.

I have fully informed myself of the content of this agreement by reading it before signing:

Participant * _____ Date _____

* Parent/Legal Guardian if participant is under 18 _____

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