Parents or Guardians: Please fill out, sign and return this form via mail or fax ASAP. This form (with the exception of the photo release portion) IN ADDITION to proof of a physical within the last 12 months should be provided PRIOR to the beginning of the camp. It is also advised, however not mandatory, that you provide a copy of the front and back of your child's health insurance in the event of an emergency.

MEDICAL RELEASE (Required)	
Camp Information	
Sport: Da	te and Time:
Camp Name:	
Camper Information	
Name:	Date of Birth:
Emergency Contacts	
Name:	Phone number:
Relationship to Camper:	
Name:	Phone number:
Relationship to Camper:	
Health History	
Please provide any pertinent medical informa personal better assist your camper (current m	ition to help our first aid responders and any additional medical nedications, injuries, allergies, etc.).
Parent/Guardian's Name (please print):	
Parent/Guardian's Signature:	Date:
PHOTO BELEASE (Ontional)	

PHOTO RELEASE (Optional)

I grant permission to the Board of Trustees of Southern Illinois University and its agents to make, use, copyright and publish news stories, still photographs and/or video or audio recordings. I grant the right and permission to use the material, including reproduction in publicity releases, slide productions, website publications, television productions or any other media. I also grant permission for representatives of news media to photograph/video my child for use in news stories about camp activities.

Parent/Guardian's Signature:

Please fax or mail this form to:

SIU Athletics – Camps 1490 Douglas Drive Carbondale, IL 62924 Fax: 618-453-7058



Date: