



ARCHERY CONSENT AND APPROVAL FORM

To be completed, signed by a custodial parent/guardian

This form is required to be filled out completely and signed in order to participate in the Girl Scout Day Camp archery activity. Participants under 18 years old, including Program Aides, must have a signature by a parent or guardian. Adult participants must also sign this consent form.

Participants Name:	Birth Date:	Age during Activity
Name of Activity: Girl Scout Archery	Date From:	Date To:

- Without restrictions
- Special considerations or restrictions: _____

HOLD HARMLESS AGREEMENT

I understand that participation in the activity involves a certain degree of risk. I have carefully considered the risk involved and have given consent for myself or my child to participate in the activity. I understand that participation in the activity is entirely voluntary and requires participants to abide by applicable rules and standards of conduct. I release the Girl Scouts of America, the local council, the activity coordinators, and all employees, volunteers, related parties, or other organizations associated with the activity from any and all claims or liability arising out of this participation.

PERMISSION FOR EMERGENCY MEDICAL TREATMENT

I understand that in the event of an emergency due to sickness or accident, the troop/group leader or a representative of Girl Scouts of California's Central Coast will make every effort to contact me or the emergency contact designated below. If no contact can be made, I authorize Girl Scouts of California's Central Coast to seek treatment for my child by a licensed medical professional under the Medical Practice Act and pursuant to Section 25.8 of the California Civil Code.

EMERGENCY CONTACT

Name	Phone(s)	Relationship to Child
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PARTICIPANT AND PARENT/GUARDIAN AGREEMENT

Participants Name	Signature of Participant	Date
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Printed Name of Parent/Guardian	Signature of Parent/Guardian	Date
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Street Address	City, State, Zip	E-Mail Address
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Home Phone	Work Phone	Mobile Phone	Other Phone
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