



Parental Consent Form

The undersigned, being a parent or legal guardian of ETC summer clinic participant, does hereby affirm that the participant is in good health, and suffers no illness, disability or condition that requires the taking of medication on a regular basis unless that information is disclosed and approved by ETC. The undersigned has no knowledge that the participant cannot participate in any vigorous physical activity.

The undersigned expressly agrees to be responsible for any medical bills incurred in the treatment of any illness or accident. In the event of any accident or injury I hereby authorize any of the camp supervisors to procure any medical treatment deemed advisable on behalf of my child, recognizing that no entity involved with Enhanced Training Champions Summer Clinic assumes responsibility for, nor do they have any liability for the care selected or provided.

I understand that, as a condition of admittance as a clinic participant, the undersigned, on behalf of all parents/ guardians, and on behalf of the participant hereby releases Enhanced Training Champions, The Boys & Girls Club, and all other staff or agents of the camp from any and all liability from injury or illness, mental or physical, suffered by the participant during or related to the summer clinic, unless caused by willful act or gross negligence by the person or entity against who the claim is made.

This _____ day of _____, 2010

Applicant's Name _____

Parent/ Guardian Signature _____

