Valparaiso Department of Parks & Recreation
Discovery Camps – Personal Information Form

Please Circle:	*Discovery Adventures (Ages 3-5)*	*Discovery Voyagers (Kindergarten)*	*Discovery Day Camp (Grades 1-6)*	*Ranger Camp (Grades 7 & 8)*

Authorized to Pick Up *(Other than parents or guardians - Ex: Neighbor)*

1. Name: _____ Relation: _____
   Daytime Phone: _____ Cell: _____

2. Name: _____ Relation: _____
   Daytime Phone:_____ Cell: _____

3. Name: _____ Relation: _____
   Daytime Phone:_____ Cell: _____

Name(s) of person(s) NOT ALLOWED to pick up my child (If Applicable)

_____

_____

Photo Use Authorization:

The Valparaiso Department of Parks & Recreation occasionally photographs park & recreation related activities throughout the year. Therefore, your child may be photographed while participating in a park program or while visiting a city park. This photo(s) may be used by the Parks Department in newsletters, promotions, publications, multimedia presentations, newspapers/magazine coverage, and/or on Park Department internet website.

In authorizing utilization of my child's photograph, I release the Valparaiso Department of Parks and Recreation and the City of Valparaiso from any claim, cause of action or entitlement that I might have as the result of the utilization of such photographs. This authorization shall remain in force and effect until the undersigned delivers to the Valparaiso Department of Parks & Recreation a written revocation.

Child's Name *(Please Print):*_____ Age:_____

___ Yes, I hereby authorize the Valparaiso Department of Parks & Recreation use of my child's photograph as outlined above.

___ No I do not authorize the Valparaiso Department of Parks & Recreation use of my child's photograph.

Parent/Guardian Signature: _____ Date: _____

Discovery Day and Ranger Camps Only:

Verification of Reviewing Character Contract:

I have read the Character Contract with my child. We understand the camp rules and guidelines.

Parent/Guardian Signature:_____ Date:_____