



Permissions form YMCA Summer camp 2017

(Participation camp depends on filling this form)

Name and Surname (camper) _____ I.D/Passport _____ DOB ___/___/___

Grade (following year) _____ T- Shirt size _____ Tel _____ E-mail _____

Food Statements(kosher food): My child Eat as regular My child has a food condition _____

Health Statements (Please fill in the details carefully, Mark the relevant box):

I do not know of any health condition that may prevent my child from full participation in the camp activities.

My child has a health condition that may prevent participation in various camp activities (attach Doctor's medical permission to participate in camp) Details _____

My child suffers from a chronic health condition (e.g Asthma, Diabetes, Epilepsy, Allergy)

Find attached medical permission given by _____ from ___/___ - ___/___

My child receives the following medication _____

Directions for application _____

- My child can apply his medication without assistance using the following medical equipment (e.g Inhaler / Injections...) _____
- I understand that if my child takes medication during the school year, cessation of medication may have physical and social effects.
- I will not bring my child to camp if they are suffering from fever or any other symptoms of contagious illnesses, such as, diarrhea, vomiting, lice.
- I understand that if my child shows symptoms of contagious illness I must collect him/her without delay. Return to camp is dependent on providing doctor's medical health approval.

Swimming permission

- I understand that during camp there are swimming pool activities in the YMCA indoor swimming pool supervised by certified lifeguards.
 - My child swims: **Yes / No**
- My child may participate in swimming pool activities

Behavior permission

- I understand that in the case of physical or verbal violence, or any other behavior that is considered unacceptable it is in the camp directors' discretion to discontinue camper's participation in the summer camp.

Advertising permission

- I permit the use of photographs taken during camp for JIY purposes and publication: **Yes / No**
- I accept emails from the Jerusalem International YMCA: **Yes / No**
- I hereby confirm that I have read and understood and agree to the YMCA Summer camp 2017 terms .
- I confirm that everything I have provided above is true and accurate. I will update about any changes.
- You can download this form from the YMCA website, fill in and submit it manually, or sending it by Fax: +972 2 5692688 or scanned to email: summercamp@ymca.org.il
- Campers without a signed, filled in permission form will not be accepted to the camp.

Date ___/___/___ Parent's Name _____ Signature _____ Tel: _____