

QUILT CAMP Liability Waiver

I understand I (or a child for which I am responsible) will be working with pins, needles, scissors, seam ripper, iron and ironing board and sewing machine.

The organization or quilt guild and volunteer staff have taken safety precautions for the camp. Safe handling of each piece of equipment is taught before the student uses it. Supervision is available throughout the class time.

First aid, which is available at the site of the camp consists of band aids and cool running water. In the event of unforeseen circumstances or serious injury to the minor for which you are responsible, you will be notified as quickly as possible. The student's safety is very important to the volunteer staff.

I give the _____ (name of group) and volunteer staff permission to seek emergency medical help, if needed, for the child I am responsible while participating in the camp activities. I also agree if my child needs medical attention that I am responsible for payment of the medical care. I will hold the organizers harmless in case of accident or emergency resulting from or during the quilt camp.

I grant permission to use photos of myself and my projects, or the child for which I am responsible, in the newsletters, website, social media or display board.

Date and Location: _____

Student's Name: _____

Parent/Guardian (if applicable): _____

Relationship (if not self): _____

Address: _____

Phone: _____

Other Emergency Phone: _____
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State any food allergies/sensitivities for yourself or for the minor student : _____

Signature of Student or Parent or Guardian: _____

I picked up the minor for which I am responsible at _____ a.m. p.m.

Parent/Guardian Signature: _____