Carrollwood Day School
JUNIOR Summer Camp Staff
Parental Permission Form

Jr. Staff First Name: ________________________ Jr. Staff Last Name: ________________________

At Carrollwood Day School (CDS), our Junior Summer Camp staff are minors which means that permission from a Legal Parent/Guardian is necessary in order to allow the participant to participate in the CDS Summer Camp Program.

Permission to participate and abide by code of conduct:

I am the parent/guardian of _________________________, now known as Participant, and hereby give my permission for Participant to participate in the CDS summer camp program as a Junior Counselor with the understanding that there will be a variety of activities and events associated with the camp’s daily programs which will take place on or near the CDS Bearss Avenue campus, unless otherwise notified. I understand that Participant will be required to sign a Junior Counselor Code of Conduct Agreement and should any rules be broken, it is at the discretion of camp staff to release Participant from the camp, upon notification to the parent/legal guardian.

________________ Your Initials

Permission to photograph or film participant:

I grant permission to Carrollwood Day School to videotape, photograph or otherwise record Participant and to use such recordings in any media, on a perpetual basis, for non-commercial purposes.

________________ Your Initials

Please select the weeks that Participant has committed to:

Week 1: June 1 – June 5: ____________________________
Week 2: June 8 – June 12: __________________________
Week 3: June 15 – June 19: _________________________
Week 4: June 22 – June 26: _________________________
Week 5: July 6 – July 10: __________________________
Week 6: July 13 – July 17: _________________________
Week 7: July 20 – July 24: _________________________

______________________________
Parent/Guardian Signature

______________________________
Date