

Emergency Health Form: Must be completed and turned in at Check-In

Name _____

In Case of Emergency:

Person to contact: _____

Phone number: _____

Known allergies: _____

Medications you take _____

Special Conditions _____

I realize that I am responsible for the security of my own possessions, as well as for my own and, if applicable, my daughter's safety.

Signed: _____

This portion must be completed if applicable:

I am under 18 and unaccompanied by my mother/legal guardian. The adult Getaway attendee responsible for my safety is:

Responsible adult sign here: _____

While I am not attending with my child (under 18), my child may need emergency medical attention and I authorize that.

Parent/Legal guardian signature: _____