

Waiver and Permission to Transport Child
Takoda Camp



Child: _____

Event: *Takoda Camp*

Date: _____

Location: *Timber Pointe Outdoor Center, 20 Timber Pointe Dr, Hudson, IL 61748*

Parent/Guardian Name: _____

Parent/Guardian Phone #(s) for emergency contact purposes: _____

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Name of Individual dropping off the child: _____

Phone #: _____

Name of Individual picking up child: _____

Phone #: _____

I give permission for my child to be transported to and from camp Takoda by the above named person (s). I acknowledge that this is an agreement between the above named person, and myself and is not the responsibility of Autism Mclean.

_____ I acknowledge that it is my responsibility to pick up my child or make other arrangements if the above named person(s) cannot for any reason come to camp to get my child.

_____ I understand that my child must be picked up by 3:00 pm daily. I understand that there could be an extra charge to have staff available to care for my child after 3:00 pm, and that I will be responsible for paying for any such care needed.

_____ I do hereby fully release and discharge Autism McLean, National Easter Seals and Easter Seals Inc., and their officers, agents, servants, employees, and affiliates from any and all claims for injuries, including death, damages, property damage, or loss which may have or which may in the future accrue to me (or my child) by signing this agreement

_____ I understand it is my responsibility to have a named Emergency contact person available during camp hours and it is not in any way the responsibility of the above named person to transport my child in the case of an emergency.

I have read, understand, and discussed with my child that:

- (1) They will be traveling in a motor vehicle driven by an adult and they are to wear their safety-belt while traveling;
- (2) They are expected to respect each other, the vehicles they ride in, and the people they travel with during the trip;
- (4) They are expected to remain in their seats and follow the same rules as they would in their own vehicle.

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____

Date: _____