A poster with a barn and birds

Description automatically generated

**2024 SUMMER CAMP**

Please check all dates that apply:

Camp is $225 per week

**June 24th – 28th**

**July 15th – 19th**

**August 5th – 9th**

**Join us for a week of getting back to our Roots by preserving and eating summer harvests, learning about gardening and nature as well as folksongs, folkdances, and art.**

**MEMBER INFORMATION**

Child’s Name:       Sex  Male  Female

First Last

Age:

Physical Address:

Number/Street City State Zip

**PARENT INFORMATION**

Parent’s Name:

Cell:

Work:

**EMERGENCY CONTACT**

Contact Name#1:       Contact Name#2 :

Cell:       Cell:

Hospital Preference:

Allergies:

Is there any other information we need to know about your child?

Children are expected to bring a sack lunch, water bottle, durable shoes, and a sun or baseball hat.

If you have any questions, please contact the front office at (530)549-8021. Please fill out all sections, sign the back, and email or mail to the office.

I       parent/guardian of

give my permission for my son/daughter to participate in the Roots Farm EDU Summer Camp on the dates listed above.

I understand that although my child/ren will be supervised by (Roots Farm EDU staff), I do assume the risk in my child/ren's participation in the event. I acknowledge that I will not seek to have Roots Farm EDU held liable in the event that any accident, injury, loss of property or any other circumstance or incident occurs during or as a result of my child/ren's participation in the field trip. This release of liability includes accident, injury, loss, or damages to my child/ren as well as, to other individuals or property which may result from my child/ren's participation in the event. I hereby release and agree to hold harmless Roots Farm EDU, its officials, agents and employees, from any claims arising out of my child/ren's participation in the event(s). I have read and understand and accept all of the statements recited above and accept full responsibility as described.

Date:\_     \_\_\_\_\_\_\_\_\_\_\_

Parent’s/Guardian’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_