



1180 West Houston Street
Anna, Texas 75409
469-952-5600
www.collincountyadventurecamp.org

Attendee Release and Parental Authorization

Name of Attendee / Student

Name of Parent / Guardian (print clearly)

School/Group Name and Dates at Camp

By my signature and of my free will, I do hereby agree to indemnify and save harmless, Collin County Adventure Camp and the YMCA of Metropolitan Dallas from any all and claims or demands, cost or expense arising out of any injuries, damages or other losses, whether personal or property, sustained by me, or any party to whom I am responsible. Any photographs/videos taken by the YMCA staff are considered property of the YMCA and may be used in newsletters, brochures, and newspapers. I give my permission for use of these photographs for media use by Collin County Adventure Camp and YMCA of Metropolitan Dallas. By my signature, I have been given information to read with regard to other YMCA and camp policies.

Signature of Attendee
(If Camp Attendee is 18 or older)

Date of signature

Signature of Parent or Guardian
(If Camp Attendee is 18 years or younger)

Date of signature

Address

Child's birthday

City / State / Zip

Parent Birthday