



United States Department of the Interior

NATIONAL PARK SERVICE
Saguaro National Park
2700 N. Kinney Road
Tucson, Arizona 85743

Wilderness Explorer Camp

Participant Permission & Medical Authorization Form

I hereby give permission to the child(ren) named below to participate in the Saguaro National Park Junior Ranger Camp. I understand that the National Park Service shall not be held liable for any accident or injury that results from negligence on the part of the participant.

Additionally, I authorize the staff at Saguaro National Park and / or the nearest medical facility the right to administer emergency first aid and / or advanced medical treatments to my child(ren), and will absorb all debts incurred from such treatment.

Name of child (please print)

Name of child (please print)

Name of parent (please print)

Signature of parent

Date

I also give permission for my child(ren) to be photographed, filmed and/or interviewed by park staff or local media which may be used in a variety of stories about the Wilderness Camp Program at Saguaro National Park or in local newspapers. We may also post images on the Park's website or Facebook page. Names and/or schools will not be printed.

Signature of parent

Date