

2025 EXPLORE Summer Camp – Permission and Waiver Form

Please fill out the applicable sections of this permission and waiver form and return via email to <u>workforcecenter@fairfieldcountyohio.gov</u> or drop off in-person at 4465 Coonpath Rd., NW, Carroll Ohio 43112. A completed, signed form is necessary for your child to participate in the EXPLORE Summer Camp(s).

□ I acknowledge that my typed signature is the legal equivalent of my manual /handwritten signature on these documents.

Child's Name(First, Last): ______

Child's Date of Birth:	Gender/Pro	nouns:
Address:		
City:	State:	ZIP:
Which school district is	the child enrolled in for the 2025-202	e School Year?:
Amanda-Clearcreek	□ Berne Union □ Bloom-Carroll	Canal Winchester
□ Fairfield Union □ La	ancaster 🗆 Liberty Union 🗆 Picker	rington 🛛 Walnut Township
School Grade for 2024-	2025 School Year: \Box 6 th Grade	\Box 7 th Grade \Box 8 th Grade
Please list below any ind Summer Camp(s).	dividuals who have permission to pick	up the participating child from the EXPLORE
Name:	Relation:	Phone Number:
Name:	Relation:	Phone Number:
Please initial the cam the same camp.	ps you would like your child to att	end. Students cannot attend two sessions of
Healthcare Heroes	Session 1: June 9 th – 13 th	Session 2: July 7 th – 11 th
Girls STEM	Session 1: June 9 th – 13 th	Session 2: July 7 th – 11 th
Totally Techbot	Session 1: June 16 th – 20 th	Session 2: July 14 th – 18 th
Builders Camp	Session 1: June 23 rd – 27 th	Session 2: July 21 st – 25 th



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Known Allergies or Medical Conditions:
Known Diatony Postrictions:
Known Dietary Restrictions:
Parent/Guardian Name:
Telephone Number(s):
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E-Mail:
Secondary Emergency Contact Name:
Telephone Number(s):
E-Mail:
L Wall.
Name of Child's Primary Care Physician:
Contact Number of Child's Primary Care Physician:

In the event of an emergency, do staff of Fairfield County, Hocking College, Fairfield County Educational Service Center, and/or Ohio University Lancaster have permission to transport the child to the appropriate emergency intake facilities?

Yes

No

Is there anything else we need to be aware about? Please describe below:

fairfield 😺 corridor

The undersigned parent(s)/guardians desire that this child participate in the EXPLORE Summer Camp(s) at Fairfield County Workforce Center. I acknowledge and agree that the use of any equipment under the supervision of Fairfield County Workforce Center faculty or staff and all trips taken under their direction shall be for the benefit of my child. In consideration of the above, I voluntarily assume all risk of accident injury, damage to property, and intend to release and discharge Fairfield County, the Fairfield 33 Development Alliance, Ohio University, and Hocking College for any injury, illness, or damage arising out of their participation in said program.

If your child requires any reasonable accommodations, program modifications, and/or inclusion services in order to ensure safe and equal access to all program activities, a **Reasonable Accommodation Request Form** must be completed and attached to this permission form.

Printed Name		
Relationship to Child	Email Address	Telephone Number
Signature		Date

I grant permission to Fairfield 33 Development Alliance to photograph and/or film my child while they are participating in EXPLORE Summer Camp activities. I agree to let the Fairfield 33 Development Alliance to publish or make other appropriate use of these films, images, and other reproductions.

Printed Name

Relationship to Child

Signature

Date



2025 EXPLORE Summer Camp – Reasonable Accommodation Request Form

To request an accommodation, please complete this form in full and submit it along with the EXPLORE Summer Camp – Permission and Waiver Form. Requests should be received as soon as possible, but no later than 5 business days prior to the start of the program.

Child's Name(First, Last):______

Summer Camp(s) registered for: _____

Weeks attending: _____

What type of accommodation(s)/modification(s) are you requesting?:

Additional Information:

Parent/Guardian Signature: _____ Date: _____



2025 EXPLORE Summer Camp – Information Form

Doors to the building open at $\underline{8:30am}$. Students must be dropped off no later than $\underline{9:00am}$ and picked up by $\underline{12:00pm}$ at:

Fairfield County Workforce Center 4465 Coonpath Rd. NW Carroll, OH 43112

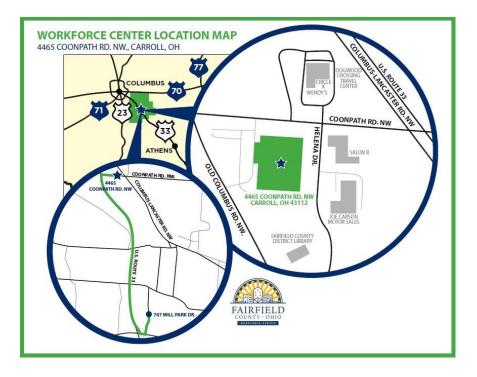
Camp Schedule:

ALL GIRLS STEM CAMP Session 1: 6/9 - 6/13 Session 2: 7/7 - 7/11

HEALTHCARE HEROES CAMP Session 1: 6/9 - 6/13 Session 2: 7/7 - 7/11

TOTALLY TECH-BOT CAMP Session 1: 6/16 - 6/20 Session 2: 7/14 - 7/18

BUILDERS CAMP Session 1: 6/23 - 6/27 Session 2: 7/21 - 7/25



For any questions, please contact:

Jenni Sturgeon

Workforce Clerical Specialist Fairfield County Economic and Workforce Development jennifer.sturgeon@fairfieldcountyohio.gov (740) 652-7177