



Affix recent passport size photograph

## Camp Application Form

Camper's name: .....

Gender: ..... Date of Birth: .....

Address: .....

Contact no.s: (Home) ..... (Mobile) .....

e-Mail: .....

Class: ..... School: .....

How did you come to know about Break Loose? .....

### *Information of parent(s) or guardian at same address as camper*

Full Name: .....

Relationship: .....

Contact no.s: (Home) ..... (Work) ..... (Mobile) .....

e-Mail: .....

Full name: .....

Relationship: .....

Contact no.s: (Home) ..... (Work) ..... (Mobile) .....

### *Medical Details*

Medical problem (if any): .....

Drug allergies (if any): .....

Has the child been under any kind of medication recently? .....

Any specific activity to be encouraged or limited by physician's advice? .....

Has the child undergone any surgery? .....

Medication, in case any, desired at the camp (Please attach the prescription along): .....

### *Authorization*

This health history is correct so far as I know, and the person described has permission to engage in all prescribed camp activities as noted by the examining physician and me. In case of an accident or sickness, Break Loose has my authorization to secure medical attention and dispensing medication for the above named as is deemed necessary in the best interest of the camper.

Parent's/Guardian's Signature

Date

P.T.O.

S.C.O. 32, Level 1, Sector-11, Panchkula, Haryana,

PIN - 134 113, Ph: 0172-4651381, 5064999

Email: info@breakloose.org, Web: www.breakloose.org



***Waivers of Liability***

I understand and acknowledge that certain camp activities, whether or not listed in the brochure, which include but are not limited to rope courses, rock climbing etc. have a risk of injury associated with them. I hereby release and agree to indemnify and hold harmless, Break Loose and all of its officers, instructors, employees, representatives and directors whatsoever from any and all losses, claims, damages, liabilities, costs and expenses including attorneys fees, which they or any of them, or camper may sustain or incur in any way arising out of or in connection with campers participation in any and all camp activities.

I have read and understood all of the above conditions and having enrolled a camper in Break Loose agree to be bound by them.

I give my consent to Break Loose to use my contact information and photographs on any of the promotional material of the organization.

Signature of the Camper:

Date:

Signature of the Parent/Guardian:

Date:

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***Request/Specific Details, if any -***

