

**Team 4099: RoboCamps**  
**EMERGENCY PROCEDURES FORM**

*Purpose: To inform parents or legal guardians of our emergency procedures.*

**Medication**

1. If a camper requires daily prescription or over the counter medications, the parent or legal guardian will be responsible for administration of the medication. RoboCamps staff are not permitted to dispense medication. Additionally, no camper is to self-medicate.
2. The Camp Director will work with parents to develop procedures for campers to have access to their personal EpiPen or inhaler (if applicable) for the duration of camp.

**Medical Treatment**

1. Anytime a camper is injured or becomes ill, the parent or legal guardian will be notified.
2. A First Aid station will be designated and equipped with a phone, a standard first aid kit, and any additional items needed for minor medical situations. This includes tweezers, Band-Aids, antibiotic ointment/cream, hand sanitizer, etc.
3. During camp operations, campers suffering from minor illness or injuries, will be escorted to the First Aid station to receive treatment.
4. In the event of a severe illness or injury, or in the event of a medical emergency, the Camp Director will be immediately contacted. The camper's emergency medical information form will be on hand. If necessary, 911 will be contacted to request EMS to treat/transport the injured to the nearest appropriate medical treatment facility. If the decision is made by EMS to transport the camper, a staff member will accompany or follow the ambulance to assist as necessary.
5. A Camper Accident/Incident Report will be completed by the staff member who witnessed the accident.

**Lost Camper**

1. If, at any point during a camp session, a camper cannot be accounted for, the situation will be immediately reported to the Camp Director and a search will be initiated until the camper is located. The camper's last known location and description will be provided to all camp staff. All areas of camp activities will be thoroughly combed. If the camper has not been located, the Camp Director will determine the next best course of action based on the information available at hand.
2. The Camp Director is responsible for notification of parents and coordination with any police or emergency service personnel.

**Other Emergency Procedures**

1. Other emergency situations, including, but not limited to, fire in the building, active shooter, and/or severe weather, will be addressed following Clarksburg High School's emergency protocol.
2. The Camp Director is responsible for notification of parents should such a situation arise.

**I, \_\_\_\_\_, a parent or legal guardian of \_\_\_\_\_ am  
aware of the emergency procedures that will be followed at RoboCamps.**

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Parent/Guardian Signature

Date

**Team 4099: RoboCamps**  
**MEDICAL INFORMATION FORM**

*Purpose: To detail important medical information about your child.*

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Camper's Name

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Camper's Age

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Allergies or Medications\*

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Medical Conditions

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Dietary Restrictions

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Parent/Guardian Name(s)

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Phone Number(s)

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Emergency Contact (other than parent) Phone Number

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Camper's Physician Phone Number

\* Our staff is not permitted to dispense medication. Please make your own arrangements.

## **Team 4099: RoboCamps**

### **LIABILITY WAIVER**

*Purpose: To acknowledge possible injury and sickness in the participation of RoboCamps.*

**I, \_\_\_\_\_, the parent/guardian of \_\_\_\_\_, acknowledge the risk that my child may get sick or injured by participating in RoboCamps.**

I further acknowledge that Team 4099 can not guarantee that my child will not become sick from interacting with other campers, counselors, and/or supervisors. I understand that the risk of becoming sick may result from the actions, omissions, or negligence of my child and others, including, but not limited to, team members and their families. I understand that any safety precautions are my own responsibility to take, and any sicknesses resulting from attending camps are my own liability.

I further acknowledge that if my child becomes infected with any communicable disease such as COVID-19, it is my responsibility to notify Team 4099 as soon as possible and keep my child at home until cleared by the team.

I further acknowledge that Team 4099 will provide proper instructions on how to use the physical materials provided. Failure to follow these instructions or any injuries resulting from doing so are my own liability.

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Parent/Guardian Signature

Date

**Team 4099: RoboCamps**  
**AUTHORIZED SIGN-IN/SIGN-OUT FORM**

*Purpose: To detail sign-in and sign-out procedures for your child.*

I authorize my child \_\_\_\_\_ to participate in self drop-off/check-out at the end of RoboCamps each day. My child will:

- ☐ transport themselves home independently.
- ☐ be transported by an authorized parent/guardian.

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Authorized Parent/Guardian 1

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Authorized Parent/Guardian 2

I, as a parent/guardian, understand that by permitting my child to self drop-off/check-out from RoboCamps, I have waived all claims against the organizers and its employees for injury, accident, or illness occurring by reason of self drop-off/check-out.

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Parent/Guardian Signature

Date

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Parent/Guardian Printed Name

Phone Number

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Parent/Guardian Email

**Team 4099: RoboCamps**  
**MEDIA CONSENT FORM**

*Purpose: To acknowledge that photographs and videos will be taken at RoboCamps.*

I, \_\_\_\_\_, being the legal parent or guardian of  
\_\_\_\_\_, do hereby understand that there will be photographs and videos  
taken during camp activities and that they may be published and used by Team 4099 to illustrate  
and promote the camp experience, RoboCamps, or Team 4099's robotics program.

☐ I give my permission and consent to allow photographs of my child to be used for the  
purposes specified above. I understand that my child will be blurred out in any  
photographs that are published by Team 4099.

Note: An unchecked box will be assumed as "no permission given". Your child will be either  
asked to step out of photos taken during camp activities or blurred out in any photographs that  
are published by Team 4099.

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Parent/Guardian Signature

Date