



2017 STATE ENVIROTHON COMPETITION
HEALTH RELEASE FORM
May 10, 11, 12, 2017

Return this form to: Dane Buysse, Coordinator or Email to: ndenvirothon@gmail.com
North Dakota Envirothon
PO Box 123
Turtle Lake, ND 58575

(There must be one form for each participant, feel free to photocopy this sheet as needed.)

Name: Home Telephone:

Home Address:

City: State: Zip: E-mail:

For housing purposes only, please check one: Male Female

IN CASE OF AN EMERGENCY, PROVIDE ANOTHER CONTACT BESIDES YOUR HOME:

Name: Telephone:

Relationship: E-mail:

Do you have any special needs, physical conditions, limitations or allergies that the staff should be aware of? Yes No If yes, please explain:

Doctor's Name: Town: Telephone:

Health Insurance Name: Insurance Number:

In the event of a medical emergency, I do authorize the Envirothon staff to give permission for emergency medical care.

I agree to defend, indemnify and hold the North Dakota Envirothon and Crystal Springs Bible Camp harmless from any and all claims, injuries, damages or other liabilities incurred while attending the ND Envirothon Competition on May 10, 11, 12, 2017

Participant's Signature: Date:

Parent/Guardian Signature: Date:

The Envirothon does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in the provision of or sponsorship of educational programs