Sheyenne River Valley Envirothon - October 2, 2024

2024 ENVIROTHON HEALTH RELEASE FORM

Return this form to: Andrea Petersen, ND Envirothon Coordinator <u>ndenvirothon@gmail.com</u> (There must be one form for each participant/advisor/volunteer. Due September 25, 2024)

Name:			Home	Telephone:
Home Address:				
City:	State:	Zip:	E-mail:	
IN CASE OF AN EMERG	ENCY, PR	OVIDE A CONT	ΓΑСΤ:	
Name:			Teleph	one:
Relationship:		E-mail:		
				llergies that the staff should be
Doctor's Name:		City:		Telephone:
Health Insurance Name:	Insurance Number:			
Envirothon Competition of Participant's Signature:	n October 2	2, 2024.		ng the Sheyenne River Valley Date:
Parent/Guardian Signatur				
2024	ENVIR	OTHON PHO	OTO REL	EASE FORM
Sheyenne River Valley, Non ND Envirothon, Sheyenne I	ne staff/of oth Dakota River Valley claims, injur	ficials to be used and National Envi Envirothon, and ries, damages or c	only for edit rothon. I agr Prairie Water other liabilitie	otographs taken of my forial and/or promotional uses of the ee to defend, indemnify and hold the rs Education and Research Center es incurred while attending the
Participant's Signature: _				Date:
Parent/Guardian Signature The Environment does not dis	e:	n the hasis of race	color nation	_ Date: nal origin, sex, religion, age or
The Environnon ages not als	criminate of	n ine vasis oj race	, cowr, nailo	nai origin, sex, religion, age or

disability in the provision of or sponsorship of educational programs