

## 2019 ENVIROTHON COMPETITION HEALTH RELEASE FORM October 1<sup>st</sup>, 2019

Return this form to: Calla Edwards, Coordinator

**Lewis and Clark Envirothon** 

PO Box 1108

Washburn, ND 58577

Email to: lcenvirothon@gmail.com or calandria.jarboe@ndsu.edu

(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:		
IN CASE OF AN EMI	ERGENCY, PF	ROVIDE ANOTHEI	R CONTACT BESIDES YOUR HOME:		
Name:		Telephone:			
Relationship:		E-mail:			
aware of?Ye	s No	If yes, please e	ations or allergies that the staff should be xplain:		
Doctor's Name:		Town:	Telephone:		
Health Insurance Name	:	Insurance Number:			
emergency medical ca I agree to defend, inde	re. emnify and hold d all claims, inj	d the Lewis and Clar juries, damages or o	Convirothon staff to give permission for rk Envirothon and North Dakota 4-H Camp ther liabilities incurred while attending the t.		
Participant's Signatur	·e:		Date:		
Parent/Guardian Sign	ature:		Date:		
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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