

**2021 ENVIROTHON COMPETITION HEALTH/LIABILITY  
RELEASE FORM  
May 2021**

**Not Required for 2021**

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 North Dakota Envirothon Competition.**

**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.*