

MAD SCIENCE CAMP AUTHORIZATION FORM

Camp ID	Dates	Times

Mad Science strives at all times to provide fun and safe science activities for all children participating in our camps. To fulfill this commitment, we ask that all children enrolled adhere to basic behavioral guidelines. Our instructors set clear boundaries and expectations as to appropriate conduct and we will hold all students to these expectations. We ask your cooperation should any parent be notified of discipline problems. It is our intention to provide children with, not deprive them of, exciting and fun science. It is only when a child interrupts this positive learning environment that we would take any such action. If necessary, Mad Science may ask that your child be removed from camp. In such a case, any refund would be at the sole discretion of Mad Science.

Mad Science also has expectations of the parents whose children are enrolled in our camps. Only children with a sincere interest in our programs and the necessary maturity to handle this environment and these learning activities should participate in our camps. An approved guardian must pick up children promptly at the dismissal of camp. Parents are welcome to observe any class and to participate where appropriate. All parents should support the learning process after camp is dismissed.

There is an element of risk inherent in participating in the scientific process and handling scientific materials and equipment. We at Mad Science of the Inland Empire take every precaution to ensure the safety of our campers and staff. It is important for campers and their parents to understand that if used improperly, and/or without instructor supervision, certain equipment and materials can be dangerous and could result in severe injury or death.

Please read carefully and sign below:

- I am the parent or legal guardian of the below named child.
- I understand that failure to abide by the policies and guidelines as outlined by my child's instructor may result in the revocation of my child's enrollment and the forfeiture of any and all funds. Further, I understand that damage to equipment and/or the facility due to reckless acts and/or deliberate indifference by my child will be my financial responsibility.
- I certify that my child is physically able to participate in all Mad Science activities.
- In the event that I cannot be contacted, I hereby fully authorize Mad Science of the Inland Empire and its employees and/or representatives and any medical personnel, hospital and/or physician to give any medical attention to my child.
- I understand that Mad Science is not responsible for my child before or after the stated camp times. I understand that Mad Science reserves the right to charge a late pickup fee of **\$1.00 per minute per child** beginning 10 minutes after the stated end time of the camp. I agree to pay this fee immediately to the Mad Science instructor should such charge be required. I understand that my child will not be allowed to return to camp until such fee is paid in full.
- I hereby release and agree to indemnify and hold harmless The Mad Science Group (a division of 2946033 Canada Inc.), NJ Kids, /dba Mad Science of the Inland Empire, its principals, officers, employees, agents and representatives, from any and all claims of any nature for injury or loss that may result from such participation, preparation for such participation or spectatorship of any and all activities and preparations.
- I agree that Mad Science of the Inland Empire assumes no responsibility for injuries or losses caused by situations or inappropriate behavior beyond their control.
- I fully consent to allow NJ Kids /dba Mad Science of the Inland Empire, its principals, officers, employees, agents and representatives to use any media, including but not limited to film and electronic photography or video, taken during this program for any and all purposes to include publicity.

With my full knowledge and consent, I expressly give my child permission to attend this program.

Child's full name (please print): _____ Date: _____

Parent or Legal Guardian's full name (please print): _____

Signature of Parent or Legal Guardian: _____

Health Concerns: _____