

MISSISSIPPI ANIMAL RESCUE LEAGUE CRITTER CAMP

“DEVELOPING TOMORROW’S RESPONSIBLE PET OWNER TODAY”
2010 REGISTRATION FORM

(REGISTRATION FEE \$125.00)

Camper Information

Please complete a separate form for each camper

Last Name	First Name	Middle Initial

Address	City, State	Zip Code

School Attending	Grade

/ /	M / F
Birthday (MM/DD/YYYY)	Gender (Circle One)

Child Adult	S M L
T-Shirt Type (Circle One)	T-Shirt Size (Circle One)

Parent/Guardian Information

		() -
Last Name	First Name	Daytime Phone

Address	City, State	Zip Code

		() -
Last Name	First Name	Daytime Phone

Address	City, State	Zip Code

Please list any special needs (medical, behavioral, physical restrictions, medications, or allergies, etc...)

Emergency Contact Information (Other than Parents/Guardians)

Last Name	First Name	Relationship

() -	() -	() -
Cell Phone	Daytime Phone	Home Phone

Minor's Physician Information

		() -
Last Name	First Name	Phone

Address	City, State	Zip Code

Medical ID #	Insurance Provider

Which Camp Would Your Child Like To Attend?

(Please Circle One)

June 1-5, 2010

June 8-12, 2010

Payment Information (We accept Check or Credit Card Payments)

Mastercard Visa American Express Discover	- - -
Credit Card Type (Circle One)	Credit Card Number

/	
Expiration Date (MM/YYYY)	Cardholder's Signature

Please print names of people, other than yourself, authorized to pick up your child:

Waiver and Release of Liability

As the parent/legal guardian of _____, age _____, I understand that said child will be participating in activities at the Mississippi Animal Rescue League and in the course of such activities may have direct contact with domestic animals, including, but not limited to: dogs, cats, birds, horses, reptiles, goats, and donkeys. All such activity will be under the direct supervision of a MARL staff member.

I further understand that the behavior of domestic animals is sometimes unpredictable and that some animals are capable of inflicting serious personal injury, as well as extensive property damage. Knowing the risks of handling animals, on behalf of the minor and myself, I agree to assume those risks and to release, indemnify, and hold harmless the Mississippi Animal Rescue League and/or any of its Officers, Directors, Employees, Agents, or Contractors for any and all personal injury and property damages resulting from said child's participation in activities.

I also understand that said child is to remain on the Mississippi Animal Rescue League's property for the duration of the activities. If my child leaves the property during participation, with or without permission from a staff member, I release, indemnify, and hold harmless the Mississippi Animal Rescue League for any and all personal injury and property damages resulting from said child leaving the Mississippi Animal Rescue League property.

I give the Mississippi Animal Rescue League authority to seek emergency medical treatment for said child. I know of no medical or other condition that would prevent said child from participations in activities at MARL.

I grant the right to photograph, videotape, reproduce, and use said child's artwork, written work, picture, and other reproductions of physical likeness in connection with MARL promotions.

	/ /
Parent/Guardian Signature	Date (MM/DD/YYYY)

Please send completed registration forms and payment to:
Mississippi Animal Rescue League
ATTN: Samantha Guillot
5221 Greenway Drive Ext.
Jackson, MS 39204

Questions?
Samantha Guillot
samanthag@msarl.org or (601) 923-1574