



FORT SILL CHILD AND YOUTH SERVICES
SCHOOL-AGE SERVICES (SAS)



CONSENT FORM

I, the parent/guardian of _____, grant permission for him/her to participate in the School-Age Services facility-based activities as follows:

_____ to all on-post and off-post excursions. I assume all risks and hazard incidentals to such participation including transportation to and from the activities. I absolve, and agree to hold the Fort Sill installation and all its agents acting officially, harmless of any claim arising out of damage to any property or from an injury to my youth, other than a claim resulting from negligence.

_____ for an authorized SAS representative to take my youth for medical or dental care, in an emergency situation where the condition of the youth represents a serious or imminent threat to her/his life, health, or well-being. I understand that a conscientious effort will be made to notify me prior to such action, and the expense, if any, is my responsibility. Treatment at an Army medical facility may be provided without consent under the provision of AR 40-3, paragraph 2-19b.

_____ to be photographed, still or video, while participating in programs/activities sponsored by SAS. My child's name and photographs, still or video, (circle appropriate) MAY / MAY NOT be published outside the SAS facility.

_____ to participate in swimming activities. However, the following instructions apply:

_____ Shallow water only (Water level is not higher than youth's neck.)

_____ 3'-5' deep (Shallow end of the pool, water may be over youth's head.)

_____ 6'-12' deep (youth may swim in deep end of pool)

If consent is not given by parent/guardian, youth must accompany day camp children to the activity, but will not be allowed to enter the pool.

Parent/Guardian - Signature

date

School Age Services Representative - Signature

date