**Team Member & Advisor Medical Information/Release Form Idaho Envirothon 2024**

Please Complete and Sign and include form with Team Registration

Students must have health/accident insurance to attend the competition.

Write N/A where not applicable. Do not leave any blanks. Type or print clearly.

Name of Student / Advisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The law requires that parental permission be obtained for medical procedures performed on all attendees. A parent and/or legal guardian shall sign the following consent form so that such procedures can be promptly carried out. We will make every attempt to notify you in case of a serious emergency.

Parent / Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Emergency Contact Person:

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Tel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Health/Accident Insurance Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Policy Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Policy Holder:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Known Allergies**:(foods, drugs, insects, etc):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We will try to accommodate special menu items (i.e. allergies, special medical needs or conditions, etc.) Participants may need to bring items if they can’t be accommodated.

**Special medical concerns or conditions we should know about:**(epilepsy, asthma, diabetes, old injuries to bones/joints, anxiety)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medications currently taking:** (dose and frequency) (Use additional paper if needed)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of family physician:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tel:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of last tetanus booster:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Adviser accompanying student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parental Photo Release Form**

**Idaho Envirothon 2024**

Please Complete and Sign and include form with Team Registration

By completing and signing this form, you agree to allow the below specified Envirothon attendee to fully participate in the Envirothon events/activities as outlined by the Envirothon schedule.

Name of student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please print or type name)

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Parent, foster parent, legal guardian, etc.)

\*I grant to the Idaho Envirothon, its representatives and employees the right to take photographs/video of me and my property in connection with the above-identified subject. I authorize the Idaho Envirothon, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

\*I agree that the Idaho Envirothon may use such photographs of my child with or without my child’s name and for any lawful purpose, including for example, such purposes as publicity, illustration, advertising and Web content.

\*Please initial in the applicable line below if you agree or disagree.

I agree\_\_\_\_\_\_\_\_\_\_\_\_\_\_I disagree\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Participant Code of Conduct Form**

**Idaho Envirothon 2024**

**NOTICE:** Each team member should read this page and submit with the team registration. Disobedience of rules and code of conduct could result in a team disqualification and team members being sent home. Upon notification by the State Envirothon Appeals Committee, the Parent/Guardian agrees that they will make arrangements to promptly pick up the dismissed team member at camp and will do so at their own expense.

**Dates and Location:** The 2024 Envirothon will be held on April 29 and 30 at Living Waters Ranch in Challis Idaho.

**Arrival:** Teams should arrive at the camp parking lot before 11:00 a.m. MDT Monday, April 29, 2024. Eat lunch before you come, as lunch will **not** be provided. The first meal to be served will be dinner at 5:30 on Monday evening.

**Transportation:** Transportation to and from Envirothon is the responsibility of the school district and/or advisor. The first camp program requiring attendance begins at 11:00 a.m. MDT. Please check with the Idaho Department of Transportation at http://511.idaho.gov/ for any reported road delays.

**Cabin assignments**: Cabin assignments are made by State Envirothon staff and will not be changed.

**Phone:** CELL SERVICE at Living Waters is not always reliable. Cell phones brought by teams will be held by Team Advisors during all parts of the competition.

**What to Bring:** Living Waters Ranch is a little over a mile high. The cabins are heated but nights can be very cool. Activities can be in hot or cold conditions. Please make sure that all items brought to camp are free of offensive logos, illegal substances, or inappropriate messages.

**DO Bring:**

* Warm sleeping bag and a pillow
* Several changes of clothing for hot and cold temperatures — layering works well
* Personal articles
* Towel and shower shoes if desired
* Sturdy shoes (broken-in for blister prevention)
* Insect repellent and sunscreen (if desired)

**DO NOT bring:**

* Electronics, stereos, iPods and/or radios
* Firearms
* Fireworks
* Knives
* Alcohol
* Illegal substances
* Non-prescription medications

**Please leave all valuables at home.**

**Camp Rules of Conduct and Responsibilities:**

Following these rules will ensure that everyone will have a safe and enjoyable experience.

1. Items from the “DO NOT bring” list, if brought to camp, or any item deemed unnecessary by Idaho Envirothon staff as it may be confiscated, and if appropriate, returned to the camper upon departure.
2. As a team member I will respect myself, other people, other people’s property, and the host property.
3. As a team member I will be an encourager, not one who ridicules, makes fun of, or criticizes.
4. As a team member I will participate and contribute in a positive way in all group activities and obey the instructions of the youth organizational staff.
5. As a team member I will use language that reflects a proper attitude. I will not use curse words or other foul language. I will not make comments that is sexually suggestive or degrading.
6. As a team member I will not use, possess or be under the influence of alcohol, tobacco, marijuana, or other illegal drugs at any time while in attendance at the Idaho Envirothon.
7. As a team member I will not engage in bulling or harassment of any kind.
8. Team members and Advisors will stay within the camp boundaries, except for scheduled off-site camp activities.
9. Team members are responsible for keeping their cabin clean.
10. Team members are responsible for lost or stolen items.
11. Team members and Advisors need to be in their cabins at 10:30 p.m., with lights out and quiet by 11:00 p.m. MDT. As a team member I will not use cell phones, iPods, cameras or other personal electronic or entertainment devices during activities or programs and will observe “lights out” by putting electronic devices away so not to disturb other cabin mates.
12. Campers will participate in all scheduled activities and are expected to be on time.
13. All team members are to stay with their class or activity until dismissed. Rudeness, disrespect, and interruptions during the event will not be tolerated.
14. Keep showers short and use a minimum of hot water. Please clean up after yourself in the shower house. Team members misusing shower facilities will be responsible for cleanup.
15. Treat the facilities with respect. If you BREAK IT OR DEFACE IT, YOU pay for it or REPLACE IT. DO NOT build fires in any area, at any time.

**Parental Consent Form**

**Idaho Envirothon 2024**

I, the undersigned parent/guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

hereby give permission to attend the State Envirothon and allow the physicians and attendant staff to perform such diagnostic, therapeutic and operative procedures for him/her as they deem necessary and refer him/her to an off-campus physician when deemed appropriate. I further give permission to have my son/daughter referred to a physician off-campus in the event it becomes necessary. I have read and agree to the code of conduct and if for any reason my child is repeatedly not following rules and/or acting in an unsafe manner, I understand that l will be called and will need to arrange transportation home for my child.

I have read the attached “Idaho Envirothon Information, Rules and Conduct” pages. I understand and agree to abide by these rules of conduct and will cooperate fully with the Idaho Envirothon Committee. For the safely of all campers, I grant the Idaho Envirothon Committee permission to search personal belongings if there is reasonable cause. I understand that disobedience of these rules and conduct could result in team disqualification and team members being sent home. Upon notification by the Envirothon Appeals Committee, the Parent/Guardian agrees that they will make arrangements to promptly pick up the dismissed team member and will do so at their own expense.

Signature of Team Member:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent / Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Advisor accompanying student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_