



Edmond Santa Fe RoboLobos  
**APPLICATION**  
 for  
 Deep Space Terraformers  
**ROBOCAMP**  
 June 6-10, 2016



Camper's Name			
Camper's Address			
Camper's Birth date		T-Shirt Size (circle one)	
	Y - S	Y - M	Y - L      A - S      A - M
e-mail address			
Grade Level			
School			
Parent / Guardian Name			

*The purpose of RoboCamp is to excite 5<sup>th</sup> grade students about math, science and teamwork using robotics as a teaching tool. **Students will be expected to be able to cooperate with a partner in the building and programming of their robot.***

The cost for camp is **\$200 dollars** per camper.

Please include a check made out to : **Edmond Santa Fe High School.**

Put: Robotics Camp in Memo area.

Parents will be required to provide transportation to and from the camp. RoboCamp begins each day at **9:00A.M. and ends at 3:00 P.M.** Campers must bring a sack lunch. A morning and afternoon healthy snack will be provided. Please note any food allergies on Emergency Medical Form.

Before your application will be processed the following forms need to be completed:

- \_\_\_\_\_ Parent or Legal Guardian's signature (below)
- \_\_\_\_\_ EMERGENCY MEDICAL INFORMATION Form
- \_\_\_\_\_ Liability Release Form
- \_\_\_\_\_ Check made out to **Edmond Santa Fe High School**

1.			
	Parent/Legal Guardian Signature	Home phone	Cell/work phone
2.			
	Parent/Legal Guardian Signature	Home phone	Cell/work phone



# Edmond Santa Fe RoboLobos

APPLICATION for  
Deep Space Terraformers  
ROBOCAMP  
*June 6-10, 2016*



## RELEASE FROM LIABILITY

I, \_\_\_\_\_, am the parent or legal guardian of \_\_\_\_\_ (“Participant”). In consideration for Participant’s participation in a Program being held at **Edmond Santa Fe High School**, I, as Participant’s parent or legal guardian, on behalf of Participant, his/ her heirs, executors, and administrators, hereby voluntarily, irrevocably, and unconditionally release and hold harmless **Edmond Santa Fe High School**, their respective trustees, officers, employees, agents and assigns (hereinafter “Releasees”), from any and all manner of claims, actions or causes of actions, whether related to or arising from the negligence of Releasees or otherwise, arising from or in connection with Participant’s participation in the Program, including but not limited to arising from Participant’s presence on the premises of **Edmond Santa Fe High School** or the Participant being transported to or from or traveling to or from the premises of **Edmond Santa Fe High School**. This release includes but is not limited to claims of active or passive negligence, products liability, personal injury, death or damage to property or violation of any laws or regulations.

---

Participant’s name

---

Parent or Guardian’s Signature

---

Date



Edmond Santa Fe RoboLobos  
Deep Space Terraformers  
ROBOCAMP  
June 6-10, 2016



## EMERGENCY MEDICAL INFORMATION

---

Camper's name

---

Camper's age

Camper's birthdate

---

Allergies or medications\*

---

Medical conditions that we should know

---

Dietary restrictions

---

Parent/Guardian name(s)

---

Home phone number

Work phone number

---

In case of emergency, please contact (other than parent) phone number

---

Camper's physician

Physician's phone number

\*Our staff is not permitted to dispense medication.  
Please make arrangements accordingly.

## **Consent to Medical Care**

**If your child sustains a non life-threatening injury, Oklahoma law requires that a hospital have parental consent before beginning treatment. This form allows you to give the necessary permission, even if your child is under the care of another adult. With your consent, this form can be presented at any medical office, clinic, or hospital in Oklahoma for emergency medical care.**

**In the event of illness or injury, student and parent/guardian hereby consent to whatever x-ray, examination, anesthetic, medical, dental, or surgical diagnosis or treatment and hospital care from a licensed physician as deem necessary for the safety and welfare of Student. It is understood that the resulting expenses will be the responsibility of the student participants and/or parent or guardian.**

---

**(Parent or guardian signature regarding Consent to Medical Care only)**

## **MEDIA RELEASE**

**I hereby grant to the *Edmond Santa Fe High School Robotics* team, the right to photograph and videotape, or sound record my child during the Robotics Camp to be used for developing promotional materials, press releases, or other items we may deem highlight and promote our program.**

---

**(Parent or guardian signature regarding Media Release)**