

NORTHWOOD RACQUET & FITNESS CLUB

CAMPER MEDICAL WAIVER & INFORMATION FORM

This form must be completed and submitted **before the first day of camp**. Campers may not participate without a completed waiver on file.

CAMPER INFORMATION

Camper Full Name: _____

Date of Birth: _____ Age: _____

Camp Enrolled In (check one):

- All Racquets Summer Camp
- High Performance Tennis Camp

Weeks Attending: _____

PARENT / GUARDIAN INFORMATION

Parent/Guardian Name: _____

Phone Number: _____

Email Address: _____

Emergency Contact (if different): _____

Emergency Phone Number: _____

MEDICAL INFORMATION

Primary Care Physician: _____

Physician Phone Number: _____

Medical Conditions

Please list any medical conditions we should be aware of (asthma, seizures, diabetes, injuries, etc.):

No known medical conditions

ALLERGIES (REQUIRED)

Please list **all allergies**, including food, medication, insect, or environmental allergies:

No known allergies

FOOD ALLERGIES / DIETARY RESTRICTIONS

Please indicate any food allergies or dietary needs:

No food allergies

Nut allergy

Dairy allergy

Gluten allergy

Vegetarian

Other (please specify): _____

MEDICATION AUTHORIZATION

Will your child require medication during camp hours?

No

Yes (please list medication and instructions below)

Medication Name: _____

Dosage & Instructions: _____

Note: Only parent-provided medication in original packaging will be administered.

CAMP SHIRT SIZE

Please select one:

- Youth Small
 - Youth Medium
 - Youth Large
 - Adult Small
 - Adult Medium
 - Adult Large
 - Adult XL
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MEDICAL TREATMENT AUTHORIZATION

I authorize Northwood Racquet & Fitness Club staff to seek emergency medical treatment for my child if I cannot be reached. I understand that I am responsible for all medical expenses incurred.

- Yes
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LIABILITY WAIVER & RELEASE

I understand that participation in camp activities involves physical activity and inherent risk. I voluntarily release, waive, and discharge Northwood Racquet & Fitness Club, its staff, coaches, and affiliates from any and all liability for injury, illness, or loss that may occur during camp participation, except in cases of gross negligence.

I acknowledge that Northwood Racquet & Fitness Club is **not responsible for lost, damaged, or misplaced personal items**, including electronics.

PARENT / GUARDIAN SIGNATURE

Parent/Guardian Name (Print): _____

Signature: _____

Date: _____