National Park Service
United States Department of the Interior

George Washington Carver National Monument

Emergency Release Form – Summer Junior Rangers 2015

In the event of a medical emergency, I _____ (parent/legal guardian name), do hereby give the staff of George Washington Carver National Monument permission to ensure my child _____ (child's name) is cared for in such a manner as is deemed reasonable and necessary by the emergency. This includes first aid given at the park or transportation to the medical facility I have indicated, if possible. I understand that the staff of George Washington Carver National Monument will make every effort to reach me, in the event of such an emergency, at the telephone numbers I have provided on this form. I also confirm that I have informed the staff of George Washington Carver National Monument of any special medical needs my child has, including allergies, seizures, diabetes, along with any special instructions, accordingly.

Peanuts are in use at George Washington Carver National Monument.

My child's special health conditions and instructions for care:

_____

_____

_____

_____

_____

_____

My choice of medical facility, if possible:_____

My emergency telephone numbers: 1st _____

2nd _____

3rd _____

Signed: _____ Date: _____