



Our Community Cares Camp, Inc.

PO Box 503

Richmond, VT 05477

Email: occcvermont@gmail.com

802-434-6006



Employee/Intern Name: _____

Employee/Intern Contact: email _____ cell: _____

Home phone _____ T shirt size _____

Emergency Contact Information:

Name: _____ Phone: _____

Email _____

Name: _____ Phone: _____

Email _____

IMPORTANT: Food Allergies, Bee Stings, Plant/Animal - Latex?

: _____

Any special considerations (physical limitations, fears, or other information?) – Please write on back of sheet, if necessary.

Primary Care Physician: _____ Phone: _____

I give permission for my child _____ to work/intern at Our Community Cares Camp, Inc. at Camels Hump Middle School and to go on camp field trips. I give OCCC, authorization to administer first aid and to arrange for emergency medical care if I cannot be reached. **(for under 18 only).**

Signed: _____ Date: _____

PHOTO PERMISSION: OCCC will be documenting this summer’s camp in photos. We would like to be able to use your photograph in reports and publicity.

I give permission for OCCC, to use my (or my child’s) photo in publicity, annual reports and other material that may be made available to the public including the OCCC website.

I do not give permission – please do not publish my (or my child’s) photo:

Employee name & signature: _____

Our Community Cares Camp, Inc. is a registered 501(c) (3) non-profit corporation.

Building a caring community – where every child can find success.

Parent or Guardian Name: _____ (under 18 only)

Work Hours And Transportation Issues:

Employees and Interns – Your supervisor will tell you what time you need to be to camp in the morning – probably sometime between 7:20 and 8 am. The work day will generally end between 1:30 and 2 pm. We expect you to be available between those hours. If you have appointments to make – doctor, dentist, interviews – please try to make them outside of those hours or make them for Friday.

If you do not have transportation available to get you to and from camp, a bus may be available, but that will mean that you cannot participate in many of the meetings and coaching sessions that will take place before camp starts and after the campers leave. (Bussing is not an option for counselors/employees – only for interns)

We can form car pools to help each other get to work on time. For interns – and those employees under 18, please have your parents sign this permission form so you can ride with another employee or parent of another intern, if needed.

I give permission for my son/daughter _____ to ride to and/or from Our Community Cares Camp with a fellow employee or intern (with adult driving) in a private automobile with a fully licensed and insured driver if I am unable to provide transportation (OCCC also carries insurance). I understand it is an important part of the job/internship that my child be present for before and after camp activities.

Signed _____ Date _____

Please feel free to add any other conditions attached to this permission i.e. you must be notified when your child is getting a ride, or you want to meet the driver.