



STARBASE Camp Rilea

Adult Academy Application and Health Form

School Affiliation _____

Name _____

Last

First

Middle

Home Phone (____) - _____

Work Phone (____) - _____

Trip Dates _____ Class Teacher _____

Destination: STARBASE Camp Rilea –33168 Patriot Way, Building #7316, Warrenton, Oregon 97146

Mode of Travel: District Vehicle

Activity: Science, Technology, Engineering and Math

I will take full responsibility for any damage that might occur to government/STARBASE property caused by my actions. Should my participation result in personal injury, I agree not to hold the US Government, Camp Rilea Armed Forces Training Center, National Guard, State of Oregon, its employees, STARBASE personnel or agents liable in any way.

I also understand that STARBASE reserves the right to terminate my participation when it is deemed to be in the best interest of either the students or academy, as determined by the STARBASE staff.

Medical Information:

Please note any medical issues (prescription drugs, illnesses, allergies, etc.) or other special issues, which STARBASE Academy should be aware of:

Person to contact in case of emergency: _____

Emergency Telephone: (____) _____

In case of emergency, I authorize STARBASE and/or accompanying chaperone to obtain emergency medical care for me if they deem necessary. I agree the cost of such medical care is my responsibility.

Participant Signature: X _____ **Date:** _____

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Photo Release Permission Form

At *STARBASE* Camp Rilea it is our practice when preparing work for external publications, video and publicity, to seek permission before including a participant's image. In order to include your photo in any *STARBASE* publication, we must have your signed permission. Participants will NOT be referred by name.

I _____ hereby grant permission for my image to appear in a
Name of Participant
photograph, video or digital imagery that will be used by *STARBASE* Camp Rilea. *STARBASE*
will hold all rights to include these images in any format or media.

Participant Name: _____
Last First Middle

Signature: X _____ Date: _____

*"Preparing Today's Children For
Tomorrow's Opportunities"*

