We are happy you have decided to join us for the first time or return for another year. It is necessary that we have for our records, information essential for your best interest as you participate in the weeklong program away from home. Consequently, we ask that you complete this form to insure your safety in case of an emergency. This form will be destroyed when we return. All information will be kept confidential.

Medical problems are referred to the Baystate Franklin Medical Center, Greenfield, MA 413-773-0211 (main

switchboard), 413-773-2263 (ER). Competent medical personnel will handle all lesser ailments on site. \* Date of Birth Name Street of Address Zip Town Spouse's name (if applicable) Phone No. Emer. No. Insurance Plan \_\_\_\_\_\_ Policy No #\_\_\_\_\_ SIGNATURE DATE "The undersigned consents to his/her enrollment in the ORR Junior High Wilderness Experience. I expressly agree to hold harmless the members of ORR District School Committee, its servants, all chaperones, or other persons associated with ORR Junior High School Wilderness Experience from responsibility by reason of my participation in said I hereby authorize such medical and/or surgical services, including the administration of anesthesia as may be recommended or ordered by a qualified physician or surgeon, to be rendered to and upon me, and further to authorize emergency treatment by first aid personnel for the treatment of any injury or illness occurring or manifesting itself while I am engaged in this experience." SIGNATURE DATE It is of utmost importance that we are provided with current and accurate medical information. This is not an appropriate time to withhold medical information for reasons of privacy, etc. All information will remain strictly confidential. If you have any (even minor) medical problems or are on daily medication, which may require some sort of treatment or special consideration, please explain below. (Reactions to insect strings, knee, ankle, or back problems are especially pertinent.)

Return this form to Melanie Lean or Susan Wheeler

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switchboard), 413-773-2263 (ER). Competent medical personnel will handle all lesser ailments on site.