

Gigi's Fabric Shop Summer Camp Student Information
813-661-9000
Where You Learn to Sew with Friends

• Student name

• Street address

Parent(s) of Student

Parents Cell Numbers

Mom

Guardian

Dad

Babysitter

Parent's Email

Secondary Email

Child's Primary Care Physician

Phone

If your child has special challenges of any kind, allergies, medical or learning disability please let me know:

• Student name

Permission is given to person(s) to pick up my child from Gigi's Fabric Shop:

Contact phone number for person (other than parent) picking up child.

By signing below I acknowledge for myself and, if applicable, on behalf of my child, the following:

I agree to release and hold harmless Carmen Wilson and Gigi's Fabric Shop and their staff from any and all claims or liability related to any accident that may arise as a result of my and/or my child's participation in this program. I understand that sewing includes the use of machines, needles, scissors, irons and other tools. These activities include risks that can cause or lead to injury. I grant permission to operate machines and to use tools and equipment. I give permission for first aid and/or medical treatment to be given if the need arises.

Signature:

Today's Date:

PHOTOGRAPHIC RELEASE:

I grant to Gigi's Fabric Shop, its representatives and employees the right to take photographs of me and/or my child in connection with sewing classes. I authorize Gigi's Fabric Shop its assigns and transferees to copyright, use and publish the same in print and/or electronically. I agree that Gigi's Fabric Shop may use such photographs of me/my child with or without my or my child's name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above.

Signature of Parent/Guardian or Class Participant over age 18 Date