



## LEC REGISTRATION / CONSENT FORM

### Informed Consent

\_\_\_\_\_ (Print first and last name)

has my consent to participate in a residential environmental learning experience to the the Laurentian Environmental Center (LEC) located in Britt, MN -15 miles north of Virginia, Minnesota. I understand the arrangements and believe that the necessary precautions and plans for the care and supervision of the students during the trip will be taken.

Beyond this, I will not hold the school or those supervising the trip responsible. I give the personnel at the Laurentian Environmental Center and/or the group leaders permission to transport my child for education or emergency purposes. I also give permission for any photographs taken during the trip to be used for promoting or advertising LEC programs.

I am aware that during this program or trip to Laurentian Environmental Center certain risks are inherent. I am also aware that particular outdoor education programs for which my child might be registered may be conducted in difficult to reach areas of the LEC site.

In consideration of the above conditions, I assume these risks and release LEC, Independent School District 621, and the staff from demands.

Signature: \_\_\_\_\_  
Parent or Guardian

### Accident Waiver Form

Parent Name: \_\_\_\_\_ Student Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Program:

Laurentian Environmental Center 7th grade trip on **March 6th - March 8th / March 8th - March 10th 2016**

In consideration of your acceptance of this registration, I hereby, for myself, my heirs, executors and administrators waive and release any and all rights and claims for damages I may have against Laurentian Environmental Center and ISD #621 or their employees and assigns for any and all injuries suffered by me at said program.

Parent or guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Dietary Restrictions

LEC can accommodate some dietary restrictions, but students need to monitor their own food allergies and aversions. Please identify any special restrictions you have below.

- I am a vegetarian or vegan and would like meals prepared to accommodate my diet.
- All of my meals must be gluten-free.
- I have a severe food allergy to: \_\_\_\_\_
- I have cultural/religious dietary restrictions which include: \_\_\_\_\_