

Immunization Waiver

The Wilds Christian Association, Inc. ("The Wilds") requires all of its campers to be immunized against polio, measles, mumps, rubella, diphtheria, pertussis (whooping cough), and tetanus according to H.H.S. standards. In the event that parents choose not to immunize their child, they must sign a statement releasing the camp from any liability due to exposure to any communicable disease (including any consequences from the withholding of tetanus immunization should their child sustain a cut or puncture wound while on the campsite).

The following statement should be signed and attached to the camper's registration form.

I, _____ (parent/guardian) have chosen not to immunize my child, _____, for _____ reasons.

I release The Wilds, and any medical personnel chosen by them, from any liability due to exposure to any communicable disease (including any consequences from the withholding of tetanus immunization should my child sustain a cut or puncture wound while on the campsite).

Signature of Parent or Guardian

Date

Parent/Guardian's Name

Parent/Guardian's Phone Number

Physician's Name

Physician's Phone Number

**Please attach this form to your child's registration form
or fax to The Wilds at (864)-331-3285.**