



Permission Slip, Medical Consent, and Photo/Video Release Form

This certifies that I, _____, being the parent/ guardian of _____

Parent/ Guardian's Name

Student's Name

do hereby give permission for the above named child to attend the 2026 Long Island Regional Envirothon on Wednesday, April 22, 2206, at the Usdan Summer Camp for the Arts, 185 Colonial Springs Road, Wheatley Heights, NY, 11798.

I hereby consent that all photographs and/or videotapes taken of my child and/or recordings made of his/her voice at the Long Island Regional Envirothon by the Envirothon Committee or its designees, may be used by the Long Island Regional Envirothon, and/or others with its consent, for the purpose of illustration and publication in any manner.

I further consent to the administration of emergency first aid treatment that may become necessary for my child's well being. _____

Signature

Date

Home Address _____
Street Town State Zip

County _____

Home Telephone # _____

Cell Phone # _____

Student's Email Address (*scholarship purposes*) _____

My child has the following allergies _____

Additional medical information _____

Long Island Regional Envirothon
1864 Muttontown Rd, Syosset, New York 11791
Suffolk - Corey Humphrey (631) 852-3285 Nassau - Derek Betts (516) 364-5860
www.longislandenvirothon.org