## TEAM Health History, Publicity, a

## Health History, Publicity, and Release Form 2021 WV Envirothon

Please turn in prior to competition date to hishman@epcd.us

Please complete to the best knowledge possible. All forms will be shredded after the event.

Team Name	Advisor				
Name					
Last		First	Middle	Suffix	
Home Address					
Gender:	Birth Date//	Age at	Event		
Custodial Parent/Guardian					
Relationship					
Home Address (if different from a	above)				
Home Phone	Cell Phone		Work Phone		
treatment including ordering x-rays of insurance purposes. I give permission be reached in an emergency, I hereby including hospitalization, for the personal process.		e of any records necessa elated transportation fo lected by the camp to se	ry for treatment, referi r me/my child. In the e ecure and administer tr	ral, billing, or vent I cannot eatment,	
			Date		
•	WV Envirothon Committee to use mited to, educational resources, p	•		•	
materials	Yes	No			
Signature of Parent or Guardian			Date		
other resources that are not prov	d that I am to follow the rules of t rided by the WV Envirothon Comn and my entire team will be disqual	nittee during the test.	If any violation of the	his rule is	
Signature of Participant			Date		
Signature of Parent/Guardian			Date		

The WV Envirothon Committee prohibits discrimination in its program on the basis of race, color, national origin, sex religion, age disability, political beliefs, and marital and/or family status. Persons with disabilities who require alternative means of communications or accommodations should contact Heather Duncan at 681-247-3013.