Submit completed form to Risk Management Services no less than three months prior to the start date of the camp. This form can be delivered to RMS at 700 North Texas Blvd, or faxed to (940) 565-4919.

PERSON COMPLETING THIS FORM: ___________________________ PHONE: (___) __________________

NAME OF PROGRAM: ________________________________________________________________

MAIN LOCATION OF PROGRAM: ______________________________________________________

CONTACT INFORMATION FOR PROGRAM DIRECTOR:

Name: ___________________________________________ Department: __________________________

Email: _________________________________ Phone: (___) _____________ Mobile phone: (___) _____________

CONTACT INFORMATION FOR SECONDARY PERSON:

Name: ___________________________________________ Department: __________________________

Email: _________________________________ Phone: (___) _____________ Mobile phone: (___) _____________

PROGRAM DATE(S)
Include beginning date and end dates for each program. Attach additional sheets if necessary. If the information provided in this form does not apply to all sessions, complete a separate Information Form for each session.

Session 1___________________Session 2___________________Session 3___________________Session 4___________________

APPROXIMATE NUMBER OF PARTICIPANTS PER SESSION:

Session 1___________________Session 2___________________Session 3___________________Session 4___________________

AGES OF CAMP PARTICIPANTS:

Session 1___________________Session 2___________________Session 3___________________Session 4___________________

APPROXIMATE NUMBER OF CAMP STAFF:

Session 1___________________Session 2___________________Session 3___________________Session 4___________________

INDICATE WHETHER THIS PROGRAM IS [check one]:

_____ Day only

_____ Overnight

CONTACT INFORMATION FOR THE PROGRAM HEALTH OFFICER:

Name: ___________________________________________ Phone: (___) __________________________

Signature of Person Completing Forms _______________________________ Date ____________________________

Program for Minors Information Forms