



Group Name
Sleepover Date

Sleepover Health History Form and Releases MINOR PARTICIPANTS

PARTICIPANTS CANNOT START PROGRAM ACTIVITIES UNTIL A COMPLETED PACKET IS ON FILE WITH THE SEAWORLD SLEEPOVER OFFICE.

The information on these forms will help us provide appropriate care if or when necessary. Legal parent/guardian of the camper must complete all information.

Any changes to information on these forms should be given to camp staff upon arrival to camp. Please provide us with complete information so the staff can be aware of all needs.

First Name Last Name Male/Female

Birth date Age at time of Sleepover

Home address City State Zip

Custodial Parent/Guardian Phone Mobile Phone *(must be registered in US)*

Emergency Contact or Second Parent/Guardian Phone Mobile Phone *(must be registered in US)*

Is the participant covered by family medical/hospital insurance? Yes No

If so, indicate carrier or plan name _____ Group # _____

Name of insured _____ Relationship to participant _____

Policyholder insurance ID number _____

Name of family physician _____ Phone _____

Name of family dentist/orthodontist _____ Phone _____

Current or chronic illness/medical condition(s) _____

Current medications (send with doctor's instructions) _____

Allergies _____

Dietary or Other restrictions _____

OVER-THE-COUNTER RELEASE

Our Health Services carry several Over-the-Counter (OTC) medications; therefore, OTC need not be sent with camper. Please contact us if you have questions regarding Over-the-Counter Medications.

I, _____ hereby give SeaWorld permission to administer the following over-the-counter medications, or suitable generic substitute, to the above participant, if the Medical staff deems it necessary. Dosages will be administered according to directions on the bottle unless a physician directs otherwise. I hereby certify that my child has not in the past shown any allergic or other adverse reaction to any of the medications which you are hereby authorized to administer. **Please cross through any medications that you do not approve for use with your camper.**

Headache, General Pain	Tylenol, Ibuprofen
Upset Stomach	Pepto Bismol, Mylanta, Tums
Diarrhea	Imodium AD, Kaopectate
Poison Ivy	Calamine Lotion, Cortaid, Caldyphen, or Caladryl
Itching, Hives	Benadryl
Coughs	Robitussin, Cepocol lozenges
Sinus Headache/Congestion	Dristan Cold, Pseudoephedrine with Tylenol, Sudafed
Sunburn	Cool Gel or Burn Spray
Bee sting	Stingkill
Cuts or scrapes	Triple antibiotic ointment
Sore Lips	Blistex
Toothache/ sore gums	Orajel

Parent/Guardian Signature _____ Date _____

CONSENT AND RELEASE FOR MEDICAL TREATMENT

In consideration of my child/ward's attendance at and participation in at the Sea World Camp and all associated activities and outings (collectively, "the Camp"), I, individually and on behalf of _____, a minor execute this Consent and Release for Medical Treatment (the "Consent") with SEA WORLD LLC, its parents, subsidiaries, related and affiliated entities, including but not limited to SeaWorld Parks & Entertainment, Inc., and their members, officers, directors, partners, shareholders, employees, agents, insurers, successors and assigns (collectively, "SEA"). I understand and agree that this Consent shall be binding on my child/ward as well as any of my child/ward's guardians, representatives, executors, heirs, next of kin, administrators, beneficiaries, successors and assigns. I represent and agree that I have the legal capacity and authority to enter into this Consent on behalf of myself and my child/ward.

I hereby authorize any licensed physician, emergency medical technician, paramedics, nurses, hospital or other medical or health care facility or provider ("Medical Provider") to provide medical care to me for any illness, injury, and/or condition that occurs, manifests or arises at the Camp. I further authorize any such Medical Provider to perform all procedures or services deemed medically advisable to treat or relieve, or to attempt to treat or relieve, any illness, injury, and/or condition my child/ward has. I acknowledge that there is a risk of complications and unforeseen consequences in any medical treatment, and **I INDIVIDUALLY AND ON BEHALF OF MY CHILD/WARD KNOWINGLY AND VOLUNTARILY AGREE TO ASSUME ANY SUCH RISK.** I acknowledge that no warranty is being made as to the result of any medical treatment. I agree that any health history I provide for my child/ward is correct to the best of my knowledge and that he/she is in good health and does not have any health or mental / physical impairments or conditions that would be aggravated by his/her attendance or participation at the Camp or that make such attendance or participation unsafe or otherwise inappropriate for my child/ward, any animals with whom he/she will interact or other campers. A copy of this Consent may be used in place of the original.

I acknowledge and agree that this Agreement is intended to be as broad and inclusive as permitted by law. If any provision is invalidated or unenforceable, the remaining terms of the Agreement shall not be affected thereby but shall be valid and enforceable to the fullest extent permitted by law. The invalid provision shall automatically be replaced by a substitute provision which is valid and as nearly as possible maintains the same purposes and intention of the invalidated or unenforceable provision. I acknowledge and agree that this Agreement shall be interpreted in accordance with the laws of the State of California.

I HAVE READ AND UNDERSTAND THE FOREGOING AND ACCEPT AND AGREE TO ITS TERMS.

Signature of Parent/Guardian: _____ Date: _____

Printed Name of Parent/Guardian: _____

Printed Name of Child/Ward: _____

PHOTO RELEASE

I, _____, the parent/legal guardian of _____, a minor participant, in consideration of my child/ward being permitted to participate in the SeaWorld Camp (the "Camp"), do hereby on my own behalf and/or on behalf of the minor participant grant Sea World LLC, its parent, subsidiaries, related and affiliated entities, officers, directors, partners, shareholders, employees, agents, volunteers, consultants, partners, contractors, successors and assigns ("SEA"), the irrevocable right and permission to photograph or otherwise record me or my child/ward in connection with the Camp, and to use the photograph or recording ("Photograph") for all purposes, including advertising and promotional purposes, in any manner in any and all media now or hereafter known, in perpetuity throughout the world, without restriction as to alteration. I waive any right to inspect or approve the use of the Photograph, and acknowledge and agree that the rights granted by this Release are without compensation of any kind.

I acknowledge and agree that neither I nor my child/ward has any right, title or interest in the Photographs. I agree that such Photographs and the copyright therein are the exclusive property of SEA. **I, individually and on behalf of my child/ward hereby release and discharge SEA from any and all claims and demands arising out of or in connection with the use of the Photographs, including but not limited to any and all claims for invasion of privacy or right of publicity.**

I represent and agree that I have the legal capacity and authority to act for and on behalf of myself or for and on behalf of the minor participant. This release shall be binding upon me and/or the minor participant, and my or the minor participant's heirs, executors, representatives, next of kin, beneficiaries, administrators, successors and assigns.

I HAVE READ AND UNDERSTAND THE FOREGOING RELEASE AND ACCEPT AND AGREE TO ITS TERMS AND SIGN IT VOLUNTARILY.

Signature of Parent/Guardian: _____ Date: _____

Printed Name of Parent/Guardian: _____

Printed Name of Child/Ward: _____

Decline use of Photograph

CODE OF CONDUCT AGREEMENT

This statement, when signed by both camper and parent, serves as an agreement with SeaWorld.

Due to the nature of the SeaWorld Camp programs, all participants are expected to act in a responsible and courteous manner at all times. Upon arrival to the program, SeaWorld staff will review examples of acceptable and unacceptable behavior. Participants are expected to adhere to the guidelines set forth by the SeaWorld staff. If a behavior problem arises, the staff will first discuss the problem with the individual. If the problem continues, the participant may forfeit participation in future program activities. If the problems are severe, the parent will be contacted to discuss the problem. Finally, if the problem is not rectified, the parents are responsible for providing transportation for the participant to leave the program and a refund will not be issued.

Examples of behavior that may result in a participant leaving a program include, but are not limited to, consumption or possession of alcohol; use or possession of tobacco products (including e-cigarettes) or illegal narcotics; possession of a weapon (real or look-a-like); destruction of property; stealing; and entering the sleeping area of the opposite gender.

Participant: I have read and understand the above statement. By signing this agreement, I agree to act in a responsible and courteous manner at all times. If I do not follow the guidelines set forth by the SeaWorld staff, I understand that I may forfeit my participation in the program.

Participant name (print) _____ Participant Signature _____

Parent: I have read and understand the above statement. By signing this statement, I agree to arrange and pay for transportation if my child must leave the program early.

Parent name (print) _____ Parent Signature _____

**RELEASE OF LIABILITY, VOLUNTARY ASSUMPTION
OF RISK, INDEMNIFICATION AND WAIVER OF CLAIM**

1. In consideration of my child/ward's attendance at and participation in at the SeaWorld Camp and all associated activities and outings (collectively, "the Camp"), I, individually and on behalf of minor participant _____, execute this Release of Liability, Voluntary Assumption of Risk, Indemnification and Waiver of Claim (the "Release") with SEA WORLD LLC, its parents, subsidiaries, related and affiliated entities, including but not limited to SeaWorld Parks & Entertainment, Inc., and all their members, officers, directors, partners, shareholders, employees, agents, insurers, successors and assigns (collectively, "Released Parties"). I understand and agree that this Release shall be binding on me, minor participant as well as any of my and/or minor participant's guardians, representatives, executors, heirs, next of kin, administrators, beneficiaries, successors and assigns.
2. I represent and agree that I have the legal capacity and authority to enter into this Release on behalf of minor participant.
3. I hereby acknowledge and understand that the activities included in the Camp and participation in the Camp involve certain risks, which may be inherent in those activities, including but not limited to personal injury, sickness, disease, death, and/or damage to and/or loss of property. **I, INDIVIDUALLY AND ON BEHALF OF MINOR PARTICIPANT, AGREE TO AND DO HEREBY EXPRESSLY, KNOWINGLY AND VOLUNTARILY ASSUME ANY AND ALL RISKS, KNOWN OR UNKNOWN OF PERSONAL INJURY, SICKNESS, DISEASE, AND/OR DEATH TO MYSELF, AND/OR DAMAGES TO AND/OR LOSS OF MY OF MINOF PARTICIPANT'S PROPERTY, REAL OR PERSONAL, CAUSED BY OR ARISING OUT OF MINOR PARTICIPANT'S PARTICIPATION IN THE CAMP AND/OR PRESENCE AT THE CAMP SITE OR AT THE SITE OF ANY CAMP ACTIVITIES, REGARDLESS OF THE CAUSE, INCLUDING THE NEGLIGENCE AND/OR FAULT OF THE RELEASED PARTIES.** I certify that minor participant is in good health and has no mental or physical condition that would prevent his/her participation in the Camp.
4. I agree that the Released Parties shall not be liable for any damages arising from personal injuries (including death), damage to or loss of property or other harm, whether foreseen or unforeseen, present or future, known or unknown, that I and/or minor participant may sustain in any way which directly or indirectly results from or arises out of minor participant's attendance at and participation in the Camp, transportation to or from the Camp or Camp activities, presence at the Camp site, the site of any Camp activities, or at any location within the Sea World Park while attending Camp. **I UNDERSTAND THAT THIS RELEASE INCLUDES ANY CLAIMS BASED IN WHOLE OR IN PART ON THE NEGLIGENCE, ACTION OR INACTION OF ANY OF THE RELEASED PARTIES AND I, INDIVIDUALLY AND ON BEHALF OF MINOR PARTICIPANT, HEREBY RELEASE, WAIVE AND FULLY DISCHARGE THE RELEASED PARTIES FROM ANY AND ALL LIABILITY FOR ANY CLAIMS, EVEN IF CAUSED IN WHOLE OR IN PART BY THE PRESENT OR FUTURE NEGLIGENCE, FAULT, BREACH OF CONTRACT OR OTHER ACT, CONDUCT OR STATUS OF ANY OF THE RELEASED PARTIES WHETHER PASSOVE OR ACTIVE (EXCLUDING GROSS NEGLIGENCE OR INTENTIONAL TORTS).**
5. I acknowledge receipt of written materials and instructions relating to the Released Parties and assert that I have had an opportunity, prior to enrolling in the Camp, to review these materials. These materials include but are not limited to the Camp handbook enclosed in the confirmation packet.
6. **I further agree to INDEMNIFY, DEFEND AND HOLD HARMLESS the Released Parties from and against any and all claims, whether foreseen or unforeseen, known or unknown, present or future, that I, minor participant or any heirs executors, administrators, assigns or anyone acting on my or minor participant's behalf may have or assert EVEN IF CAUSED IN WHOLE OR IN PART BY THE PRESENT OR FUTURE NEGLIGENCE, FAULT, BREACH OF CONTRACT OR OTHER ACT, CONDUCT OR STATUS OF ANY OF THE**

RELEASED PARTIES WHETHER PASSIVE OR ACTIVE (EXCLUDING GROSS NEGLIGENCE OR INTENTIONAL TORTS).

7. This Release is intended to be as broad and inclusive as permitted by law, and if any portion thereof is held invalid, the balance shall continue in full legal force and effect. The invalid portion shall automatically be replaced by a substitute provision which is valid and as nearly as possible maintains the same economic purposes and intention of the invalid portion. To the extent that any provisions in this Release are held to be irreconcilable with or mutually exclusive of other provisions in this Release, said provisions are to be considered separately and in the alternative.
8. This Release is not intended to release the Released Parties from any conditions or activity that, as a matter of law, cannot be avoided, waived or released and no provision of this Release should be interpreted as such.
9. I expressly waive any and all rights I and/or minor participant may have under Section 1542 of the Civil Code of the State of California, which states "A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which if known by him or her must have materially affected his or her settlement with the debtor".

This Release shall be governed by the substantive provisions of California law, without reference to its principles of conflicts of law.

I HAVE READ AND UNDERSTAND THE FOREGOING RELEASE, ACCEPT AND AGREE TO ITS TERMS AND SIGN IT VOLUNTARILY AND AM EIGHTEEN YEARS OF AGE OR OLDER AND HAVE THE LEGAL CAPACITY TO ENTER INTO THIS RELEASE ON BEHALF OF MYSELF AND MINOR PARTICIPANT.

Participant name (print) _____ Participant Signature _____

Parent: I have read and understand the above statement. By signing this statement, I agree to arrange and pay for transportation if my child must leave the program early.

Parent name (print) _____ Parent Signature _____