



## Field School Registration Form

July 31 – August 3, 2023 6pm – 8pm  
The Castle

Enrollment in the Archaeology Field School at The Castle is for high school ages and adults. The registration fee of \$50.00 per individual covers the cost of all the materials for the camp.

As part of the registration process, please fill out the Emergency Medical Authorization and Photo Release forms, which are included. Field School size is limited to 12 participants on a first-come-first-served basis, so early registration is encouraged.

**Please return registration papers along with payment by Friday, July 14, 2023 by 4pm to The Castle.**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (Best to reach you)

Email Address: \_\_\_\_\_

Age: \_\_\_\_\_ Grade Entering (if applicable): \_\_\_\_\_

Name of School: \_\_\_\_\_ (if applicable)

Registration Fee: \$ \_\_\_\_\_

**\*Please note: Friday, August 4 is reserved as a back-up day in the event of rain.**

Please make checks payable to: The Castle, 418 Fourth St., Marietta, OH 45750

For more information call The Castle at (740) 373-4180

*In the event of an emergency, The Castle contacts emergency services, and then the primary and secondary contacts listed on this form. This form will be provided to emergency service personnel.*

## Emergency Medical Authorization

**Name:** \_\_\_\_\_

**Primary Emergency Contact Name:** \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Secondary Emergency Contact Name:** \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

### Medical History

Allergies (Food, Pollen, Etc): \_\_\_\_\_

Food Preferences (Vegetarian, Vegan, Etc.): \_\_\_\_\_

Medications Being Taken: \_\_\_\_\_

Tell us a little about you/your camper:

- My camper/I use(s) a wheelchair, crutches, walker or another mobility aid
- My camper/I might be sensory sensitive
- My camper/I has (have) vision loss
- My camper/I is (am) deaf or hard-of-hearing
- My camper/I has (have) an intellectual disability

Please elaborate on any boxes marked:

\_\_\_\_\_

Is there anything else you wish for us to know about you/your camper?

\_\_\_\_\_

\_\_\_\_\_

**Part I: To Grant Consent**

I hereby give consent for the following medical care providers and local hospital to be called.

Doctor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Dentist: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Medical Specialist: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Local Hospital: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Can we administrator first aid?  Yes  No

In the event, reasonable attempts to contact me have been unsuccessful, I hereby give my consent for (1) the administration of any treatment deemed necessary by the above-named doctor, or in the event that the designated practitioner is not available, by another licensed physician or dentist, and (2) transfer to any hospital reasonably accessible.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/ Parent or Guardian Signature

**Part II: Refusal to Consent**

I do NOT give my consent for emergency medical treatment of me, or my camper. In the event of illness or injury requiring emergency treatment, I wish The Castle authorities to take the following action:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/ Parent or Guardian Signature

Date Forms Received: \_\_\_\_\_  
Date Fee Received: \_\_\_\_\_

## Permission to Use Photograph

Event: Archaeology Field School 2023

Location: The Castle

Name(s): \_\_\_\_\_

- I grant to The Castle, its representatives and employees the right to take photographs of me, or my camper in connection with the above-identified event.

I agree that The Castle may use such photographs of my camper with or without their name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, web content, and social media.

- I do NOT grant to The Castle, its representatives and employees the right to take photographs of me, or my camper in connection with the above-identified event.

I have read and understand the above:

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Printed Parent/Guardian Name: \_\_\_\_\_

Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## **Archaeology Field School Guidelines**

**Be on time every day! Archaeology Field School is designed to begin and end at given times in order to fit many fun-filled experiences into each day. The program builds on itself, so it is helpful to attend every day.**

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**The Castle is not responsible for any lost, stolen, or damaged items during Archaeology Field School. Please refrain from bringing valuables (cell phones, gaming devices, apple watches, jewelry, etc.) to camp.**

**• • • • •**

**Bring your own water bottle adequate for the two-hour session.**

**Dress comfortably and sensibly.  
Old clothes that can get dirty are the best.**

**Remember sunscreen and hats.**

**No flip-flops or open-toed shoes.**

**We will be outside in the dirt.**

**Work gloves will be provided and should be worn at all times while excavating.**

**• • • • •**

**Every effort has been made to make camp enjoyable and educational for all.**

**Should a participant's behavior interfere with others, the camper will be asked to leave or the camper's parent/guardian will be called to pick up the camper.**