Please return consent form & registration form to:
ATTN: Denise Shell
Biloxi Fire Department
170 Porter Ave.

Biloxi, MS. 39530



Registration must be received no later than 5/10/23 at 12:00 pm.

For more information, contact Denise Shell at 228-435-6209 or dshell@biloxi.ms.us

2023 FIRE ACADEMY FOR KIDS PARENT / GUARDIAN CONSENT FORM

I certify with full knowledge and c	onsent that my child,
(print child's full name)	, whose
birthday is	_ may participate in the Biloxi Fire Department's Fire
Academy for Kids. Thursday will	be a water day depending on the weather. While I expect the
fire department and camp staff to	exercise reasonable precautions to avoid injury, I do
understand that neither the City of	of Biloxi, the Biloxi Fire Department, nor its employees are
responsible for injuries sustained	to my child as a result of his/her participation in any of the
activities of this academy. I under	rstand that the City of Biloxi is not liable for any illness that my
child may contract while attending	g this academy (including Covid-19). I agree to not let my
child participate if they are exhibi	ting symptoms such as fever, cough, sore throat, etc. While I
expect the Biloxi Fire Departmen	t and camp staff to exercise reasonable precautions, I
understand that my child's image	may be used on the City of Biloxi's Facebook page, website,
or other media outlets and/or may	y be used by local media.
Parent's Day Phone:	Alternate Phone:
Emergency Contact Name(s):	
Emergency Contact Number(s): _	
Print Name of Parent/Guardian: _	
Signature of Parent/Guardian: Parent consent form must be find Academy for Kids Camp.	Date: illed out and signed in order for child to participate in Fire
Academy for Kids Camp.	