

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 5/10/24 at 4:00 pm.**

For more information, contact Denise Shell at 228-435-6209 or [dshell@biloxi.ms.us](mailto:dshell@biloxi.ms.us)

**2024 FIRE ACADEMY FOR KIDS  
PARENT / GUARDIAN CONSENT FORM**

I certify with full knowledge and consent that my child, (print child's full name) \_\_\_\_\_, whose birthday is \_\_\_\_\_ may participate in the Biloxi Fire Department's Fire Academy for Kids. Friday 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 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 understand that the City of Biloxi is not liable for any illness that my child may contract while attending this academy (including Covid-19). I agree to not let my child participate if they are exhibiting symptoms such as fever, cough, sore throat, etc. While I expect the Biloxi Fire Department 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 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: \_\_\_\_\_ Date: \_\_\_\_\_

**Parent consent form must be filled out and signed in order for child to participate in Fire Academy for Kids Camp.**