



Summer Camp Tick Removal Permission Form 2024

Student Name _____

_____ I give permission for a Bridge School employee to remove a tick from my child using a proper extraction tool (tweezers, tick removal spoon or other specialized tool).

- I understand that the Bridge School employees will call and email immediately upon finding the tick. They will save the tick when possible.
- I understand that Bridge School employees reserve the right to refuse to extract the tick based on comfort of both the staff and student and/or location of the tick.
- I understand that Bridge School employees will NEVER remove a tick from a child's private areas. If the tick lies under the child's "bathing suit area," the tick will not be extracted.

_____ I do not give permission for Bridge School employees to extract a tick from my child.

- I understand that Bridge School employees will call and email immediately upon finding the tick and mark the tick with a bandaid when possible.
- I understand that Bridge School employees will NOT accept permission to extract the tick over the phone; a signed liability waiver (this form) must be completed giving permission if I wish for them to extract the tick.

By signing this form, I hereby state that I understand that Bridge School and its employees are not liable for any injury that may occur during tick removal or any potential injury due to waiting for a guardian to remove the tick.

(Signature of Parent or Guardian)

(Date)