

# Camp Integrations

Building Skills for Fun and Friends

## CONSENT FORM

This shall serve as an agreement between Camp Integrations, L.L.L.P. and \_\_\_\_\_, the parent or legal guardian of \_\_\_\_\_ who will participate in Camp Integrations.

The parent understands that, in signing this agreement, their child will receive services by the practitioner, a qualified employee of the practitioner, or a subcontractor selected by the practitioner, under a treatment plan designated by the practitioner, the employee, or the subcontractor, and that the treatment plan will be verbally described to the parent by the practitioner, employee, or subcontractor before the treatment begins.

The practitioner, employee, or subcontractor will be responsible for exercising a standard quality of care consistent with the normal expectations of the profession. The parent, in turn, agrees to offer full cooperation to the practitioner, employee, or subcontractor to maintain that standard quality of care.

The parent further agrees that he/she will compensate the practitioner and will be responsible for all fees designated by the facility for services rendered.

\_\_\_\_\_  
for CAMP INTEGRATIONS

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT'S SIGNATURE

\_\_\_\_\_  
DATE

