

The Salvation Army - Pine Summit

CONSENT AND WAIVER OF LIABILITY

THIS DOCUMENT (FRONT AND BACK) CONTAINS A WAIVER OF LIABILITY. PLEASE REVIEW IT CAREFULLY BEFORE SIGNING.

- please print -

Group Name: _____ Group Date: _____

Full name of Camper: _____ Gender: _____ Date of Birth: _____

In exchange for permission to participate in The Salvation Army - Pine Summit programs and activities ("Camp"), I or my minor child named above ("Camper") agree to the following:

Consent to Attend Camp (Where Camper is a Minor)

I hereby give permission for minor Camper to attend and participate in Camp.

WAIVER of Liability

I understand that some of the activities at Camp involve risk of property damage and of personal injury, illness or even death of Camper, including but not limited to the risks arising from transportation-related activities, recreational activities, accidents in the outdoors and rustic facilities, adverse weather conditions, and injuries and illness as a result of food-borne illnesses and allergic reactions.

By signing this Consent and Waiver of Liability, I warrant that Camper is fully capable of safely participating in all Camp activities. I agree to assume all risks of Camper's participation, whether such risks are known or unknown to me at this time and hereby waive any and all claims I or my Camper may have against Pine Summit, and their directors, officers, employees, volunteers, and agents, and other campers at the Camp, for property damage or personal injury, illness or death of Camper as a result of participation in Camp activities, whether on or off Camp grounds. I agree that this release includes the ordinary, special and inherent risks described above, and other risks that I may not foresee or be aware of at this time. This Waiver of Liability is given on behalf of myself, my minor child (if Camper), and the heirs, family, estate, administrators, executors, personal representatives and assignees.

I understand that by signing this Consent and Waiver of Liability, I give up my right and the Participant's right to sue The Salvation Army. I agree that if any provision or part of any provision or the application of such is held invalid, illegal, or unenforceable, the validity of all other provisions in this Consent and Waiver of Liability shall remain unaffected.

FIRST AID

Camp may provide minor emergency medical treatment at the request of the Group or Camper, provided that qualified staff is available. Otherwise, all medical emergencies will be referred to the nearest medical treatment facility.

Other Releases and Acknowledgements

I understand that, while Camper is participating in Camp activities, photographs, film, audio recordings and videotape of Camper may be taken for use in brochures, videos, releases to the press, and various Pine Summit publications and other work product. I do hereby irrevocably grant Pine Summit permission to record, display and/or reproduce Camper's name (first name only), likeness and voice on audio and/or video tape, film or other media, to edit and otherwise modify such media at its discretion, to incorporate the media into any work product, and to use or authorize the use of such media or any portion thereof in any manner or media or by any means, methods or technologies now known or hereafter to be known.

Adherence to Policies and Guidelines

I ensure that Camper will adhere to the Camp policies and guidelines. If Camper fails to abide by established rules and/or standards of conduct, Camp staff reserves the right to send Camper home. If it becomes necessary to send Camper home, I hereby agree to provide transportation or to make travel arrangements for Camper and to assume the cost of these expenses.

Medical Insurance Information

Insured's Name: _____ Company: _____ Policy Number: _____

Medical Information (COMPLETE ONLY IF CAMPER IS A MINOR)

Doctor's Name: _____ Doctor's Phone: _____

Date of last MMR: _____ Date of last Hepatitis B: _____ Date of last Tetanus: _____

Are all other vaccinations up-to-date? Yes No

Does the Camper have any allergies to drugs and/or food (please write "None" if applicable): _____

Does the Camper have behavioral problems or medical needs we need to be made aware of (write "None" if applicable): _____

Will the Camper be under any medication(s)* while at camp? Yes No If yes, please list medication(s): _____

**** (All medications must be given to camp nurse in original containers with original label attached containing prescription and camper's name)***

The camp nurse has my permission to provide the Camper with non-prescription medicines as deemed necessary. Yes No

If yes, please list any over-the-counter medications that should **not** be given: _____

Does the Camper have any physical condition or limitation that would restrict participation in any camp activities? Yes No

If yes, please provide details: _____

Does the Camper have? Sinus Trouble/Hay Fever Heart Trouble Epilepsy Asthma Diabetes

By signing below, I acknowledge that I have read this document that all information provided is accurate. Each legally responsible parent/guardian is required to sign below.

_____		_____	
Signature		Date	
_____		_____	
Print Name		Phone Number	
_____	_____	_____	_____
Address	City	State	Zip
_____		_____	
Emergency Contact (if same write "Same")		Phone Number	

**If you have any allergies or special dietary needs – please bring your own food.
 We have refrigerators and microwaves to accommodate your needs.
 If you would like to see a menu, please ask your Retreat Planner.
 Thank you**

What to Bring to Camp

Year-Round

- | | |
|--|--|
| <input type="checkbox"/> <u>CONSENT AND WAIVER OF LIABILITY FORM</u> | <input type="checkbox"/> Toothbrush and toothpaste |
| <input type="checkbox"/> Sleeping bag & Pillow (for some rooms) | <input type="checkbox"/> Towel, washcloth, soap |
| <input type="checkbox"/> WATER BOTTLE | <input type="checkbox"/> Comb/Brush |
| <input type="checkbox"/> Bible | <input type="checkbox"/> Other personal items |
| <input type="checkbox"/> Notebook and pen | <input type="checkbox"/> Laundry bag |
| <input type="checkbox"/> Spending money (\$20-\$60) | <input type="checkbox"/> Lip balm |
| <input type="checkbox"/> Camera | <input type="checkbox"/> Hand lotion |
| <input type="checkbox"/> Flashlight | <input type="checkbox"/> Sun Screen (Yes-even in Winter) |

Summer

(In addition to the items mentioned under Year-Round)

- | | |
|---|---|
| <input type="checkbox"/> Swimsuit – One piece | <input type="checkbox"/> Long pants for night |
| <input type="checkbox"/> Beach towel | <input type="checkbox"/> Sweatshirt |
| <input type="checkbox"/> Jacket | <input type="checkbox"/> Raincoat |

Winter

(In addition to the items mentioned under Year-Round)

It is a good idea to wear several layers in the Winter.

- | | |
|---|---|
| <input type="checkbox"/> Beanie/ knit hat | <input type="checkbox"/> Jacket/coat |
| <input type="checkbox"/> Gloves | <input type="checkbox"/> Winter boots |
| <input type="checkbox"/> Non-slip shoes | <input type="checkbox"/> Winter pants |
| <input type="checkbox"/> Warm clothes | <input type="checkbox"/> Extra blanket (optional) |
| <input type="checkbox"/> Extra socks | |

Important Information

Food allergies & Special diets

If you have any allergies or special dietary needs – you are encouraged to bring your own food. We have a refrigerator, microwave & toaster to store and heat up your food.

Winter months

Always remember: We are in the mountains with temperatures dipping below freezing in the winter. It is a good idea to bring clothes that you can wear in layers. Also, Recreation can change because of weather. If that happens, we're sorry for your disappointment, but we want you safe.

Camp Code of Conduct

Pine Summit – as a Christian camp – is an extension of the house of God,
So Please, let's treat it as such.

⊕ Curfew: 12am SHARP!

⊕ Wristbands:

- ⊕ Wristbands are to be worn – ON THE WRIST – at all times
- ⊕ If it falls off, bring it to the office and exchange it for another one
- ⊕ If you lose it, you will need to pay for it
- ⊕ If you do not have one on, you will be asked to leave the area until you get one on

⊕ Ponderosa dining hall:

- ⊕ Take what food you will eat
- ⊕ Make sure there is no trash on or around your table
- ⊕ Clean your table thoroughly
- ⊕ Push your chairs all the way in
- ⊕ Leave it looking at least as good as when you came in
- ⊕ If it is closing time and you are asked to leave – please do – Happily

⊕ Meeting rooms:

- ⊕ Pick up all trash
- ⊕ If you spill something – clean it up thoroughly
- ⊕ Turn off lights every time you're going to be out for a while

⊕ Grounds:

- ⊕ Please stay off the roofs. It is very dangerous.
- ⊕ If you see anyone horsing around the windows – please ask them to step away from them.
- ⊕ Use basketballs for basketball, volleyballs for volleyball – and so on.
- ⊕ Be respectful of all the recreation equipment
- ⊕ Put trash in the trash bins

⊕ Personal:

- ⊕ Boys and girls are not to be in each other's rooms for any reason
- ⊕ Boys and girls should wear appropriate clothing
- ⊕ Everyone should be respectful of each other in all circumstances
- ⊕ Entire stay-including free time-Your leadership is responsible for supervising your kids