

# SUGARLOAF CHRISTIAN CAMP

## General Release and Hold Harmless Clause

**This form is valid for ANY day camps and All full weeks of Sugarloaf Christian Camp for the summer of 2020 and beyond. Please print in ink and SIGN this form (you and your child) before you turn it in.**

Please read this form carefully. By signing it, you agree to forever release Sugarloaf Christian Camp from any and all liability of whatsoever kind and that you at all times hereafter indemnify and hold harmless Sugarloaf Christian Camp, from any and all causes of actions, proceedings, claims, demands, costs, damages, and expenses, which may be brought against or claimed from Sugarloaf Christian Camp, or which we may pay, sustain, or incur as a result of injury, illness, accident, or misadventure to named applicant, during the period that said applicant is a participant at Sugarloaf Christian Camp.

**CAMPER'S FULL NAME** \_\_\_\_\_

**BIRTHDATE** Mo. \_\_\_\_ Day \_\_\_\_ Year \_\_\_\_

### **Health Information:**

(attach letter to explain any allergies or health problems) ☐ Please check here if provided.

Are camper's immunizations up to date? \_\_\_\_\_

Name of camper's health insurance if applicable: \_\_\_\_\_

Health insurance group and policy numbers: Group # \_\_\_\_\_

Policy # \_\_\_\_\_

**(1) RELEASE OF LIABILITY AND INDEMNIFICATION:** I the undersigned have legal custody of the student named above, a minor, and have given our consent for him/her to attend events being organized by Sugarloaf Christian Camp. I/We understand that there are inherent risks involved in any camp or athletic event, and I/We hereby release the camp, its boards of directors, staff, adults, agents, and volunteer workers from any and all liability and causes of actions, proceedings, claims, demands, costs, damages, and expenses, which may be brought against or claimed from Sugarloaf Christian Camp, or which we may pay, sustain, or incur as a result of loss, damage to person or property, injury, illness, accident, or misadventure to named applicant, during the period that said applicant is a participant at Sugarloaf Christian Camp. In the event that he/she is injured and requires the attention of a doctor, I/We consent to any reasonable medical treatment as deemed necessary by a licensed physician. In the event treatment is required from a physician and/or hospital personnel designated by Sugarloaf Christian Camp, I/We agree to hold such person free and harmless of any claims, demands, or suits for damages arising from the giving of such consent. I/We also acknowledge that we will

be ultimately responsible for the cost of any medical care should the cost of that medical care not be reimbursed by the health insurance provider or if I/We do not carry any health insurance. Further, I/We affirm that the health insurance information provided, if applicable, is accurate at this date and will, to the best of my/our knowledge, still be in force for the student named above. I/We also agree to bring my/our child home at my/our own expense should he/she become ill or if deemed necessary by Sugarloaf Christian Camp staff members.

**(2) PHOTO/VIDEO RELEASE:** I/we hereby assign and grant Sugarloaf Christian Camp on behalf of myself/ourselves and on behalf of my/our child(ren) permission to use and publish photographs and video recordings taken of my child during any week of Sugarloaf Christian Camp for use in printed publications, audio visual media, social media and the camp website. I hereby release Sugarloaf Christian Camp from any and all liability from such use and publication.

**(3) TERMS OF AGREEMENT:** I/we understand that this release is an agreement that extends forever into the future and will have full force and legal effect each and every time my child visits Sugarloaf Christian Camp or participate in any activities or events at the camp.

This release form gives \_\_\_\_\_ my permission to

**(NAME OF CAMPER )**

participate in all Sugarloaf Christian Camp activities and releases Sugarloaf Christian Camp of any and all liability of whatsoever kind in accordance with the provisions stated above.

Parent/guardian signature(s): \_\_\_\_\_

Date: \_\_\_\_\_