## Alliance Redwoods, Occidental, CA November 17 – 19, 2023



# mountain harmony camp

Region 12 Sweet Adelines International

## **CAMPER REGISTRATION**

	Must be 13 years old by 12/30/23 to attend				Registration may be completed online: www.mountainharmonvcamp.org			
Camper's Name:				First name you want printed on badge:				
				ndate:		Age:		
City, State, Zip: D					Driver Lic #:			
Camper's Contact Numbers:								
Home phone:								
Email you want your instructions sent to:								
School								
			ol City:			irade:		
Channe Affiliation	1.				·			
Chorus Affiliation	<b>/s</b> r of Sweet Adelines?	If yes,						
O Yes O No			s name:					
	ips you may sing with. Ex: school,			; D	irector's Name/s:			
Emorgoncy Contact	c							
Emergency Contacts Parent / Guardian Names:								
Contact #1 Name:					Relationship:			
Address:					Phone:			
City, State, Zip:				P	Phone:			
Address:	Contact #2 Name:				Relationship: Phone:			
City, State, Zip:				Phone:				
Medical Information			Group #		Policy #:			
Physician Name:				in Phone #:				
List All Medical Conditions (including ADD/ADHD)								
List All Medications (including over the counter drugs):								
NOTE: In order for <u>any</u> medication to be dispensed to your minor child we need the following turned in at camper check-in: <ul> <li>Medicine contained in original pharmacy prescription bottle displaying child's name</li> </ul>								
<ul> <li>Any over-the counter medications in their original containers</li> <li>MHC Parent Consent for Administration of Medications</li> </ul>								

mountain	harmony	/ cam	p Ca	mper

### Medical Information (cont.)

List All Allergies (including food or drug allergies)

#### For specific meals please check: Gluten Free Vegetarian

#### **Release of Claims**

I acknowledge that I am participating in Sweet Adeline International's, Region 12, Young Women in Harmony Program's, **Mountain Harmony Camp**, further known as (the Event), **Nov. 17-19, 2023, at Alliance Redwoods Conference Center, Occidental, CA**, on my own accord. I give this acknowledgement freely, and knowingly, and I represent and warrant to you that I am physically and mentally fit, and that as a result, am able to participate, and I do hereby assume responsibility for my own well-being. I am fully aware that possible physical injury might occur to me as a result of my participation, and I agree to assume the full risk, including risk which is not specifically foreseeable, of any injuries, including death, damages, or loss, regardless of severity, which I may sustain as a result of participating in any and all activities connected with or associated with the Event. In consideration of the right to participate in the Event, I hereby waive any and all rights or claims I may have as a result of participation in the Event against Sweet Adelines International and further agree to indemnify, defend, and hold harmless Sweet Adelines International, its directors, officers, employees, members, staff, and all individuals assisting in instructing and conducting these activities, and I hereby fully release and discharge them from any and all claims resulting from injuries, including death, damages, or loss, which may accrue to me or my heirs, arising out of, or in any way connected with my participation in the Event.

Participant's Signature (required	)	Date	Birthdate					
If under 18 years of age parent must also sign below:								
I, being the parent/guardian of, hereby give permission for my daughter to participate in the above Event. I have read, and agree with, all terms of the above Release of Claims.					Event.			
Parent Signature		Date	Print Name					
Photo/Recording Release								
I hereby give permission for Sweet Adelines International and any of its affiliated organizations, including, but not limited to its regions and chapters, to use my name and/or photographs/artwork/videotapes/electronic representations and/or sound recordings on an ongoing basis for promotional, news, or public relations purposes in print and/or electronic media. I hereby consent that such photographs/artwork/videotapes/electronic representations and/or sound recordings on an ongoing basis for promotional, news, or public relations purposes in print and/or electronic media. I hereby consent that such photographs/artwork/videotapes/electronic representations and/or sound recordings shall be the property of Sweet Adelines International and any of its affiliated organizations. They shall have the right to duplicate, reproduce, and make other uses of such as they desire, free and clear of any claim whatsoever on my part. All rights to fees, commissions, royalties, or profits received as the results of the distribution, sale, or lease of the recordings in any form, are assigned to Sweet Adelines International, to be used in any manner consistent with the purpose of Sweet Adelines International.								
Participant's Signature (require	d)	Date	Birthdate					
If under 18 years of age parent must also sign below: I, being the parent/guardian of,hereby agree and consent to the terms in the above Photo/Recording Release. I have read, and agree with, all terms of the above Release.								
Parent Signature		Date	Print Name					
Circle your T-shirt Size:	XLg Child	Sm Adult	Med Adult	Lg Adult	XLg Adult	1X	2X	3X
Housing:								

Housing:							
We do our best to keep age levels, schools, and friends housed together, or close by, but there is no guarantee. Remember, this is							
a great place to make new life-long friends. However, if you have a roommate request please note it below:							
Name	School/Group	Name	School/Group				
1.		2.					
3.		4.					

<u>Return to camp director</u>: □ Registration Form (2 pgs), with original signatures, by postal mail or email □ Registration Fee of \$180.00 payable online: https://mountainharmonycamp.org or make checks payable to; Pacific Shores Region 12 □ Mail checks/forms to: Mountain Harmony Camp c/o Cyndi Sharp 4125 Modoc Ct., Concord, CA 94521

Email: mtharmonycamp@gmail.com Questions? Call: 925-639-2963