

**Faith Baptist Youth Camp**  
**Camper Registration and Release Form (under 18 yrs. old)**

615 Denas Cove Rd, Ragland, AL 35131

Camp Phone (205) 472-2155

**Camper Information:**

Camp Dates: \_\_\_\_\_

Camper's Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Male/Female: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Church: \_\_\_\_\_ Pastor: \_\_\_\_\_

**Parent / Legal Guardian Information:**

Parent/Guardian Name: \_\_\_\_\_

Relationship to Camper: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**Emergency Contact (if different):**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to Camper: \_\_\_\_\_

**Medical Information:**

Medications Regularly Taken: \_\_\_\_\_

Allergies/Medical Conditions: \_\_\_\_\_

Treatment Giver: \_\_\_\_\_

Restricted Activities (if any): \_\_\_\_\_

Date of last Tetanus Injection: \_\_\_\_\_

Insurance Provider (optional): \_\_\_\_\_

Insurance Policy #: \_\_\_\_\_

Camp Activities include but are not limited to Basketball, Dodgeball, Softball, Kickball, Volleyball, Swimming, Boating, Canoeing, Kayaking, Paddle Boating, Ping Pong, Foosball, and Air Hockey.

**Medical Emergency Authorization:**

**For Parent/Guardian:**

In the event of a medical emergency, I authorize Faith Baptist Youth Camp, its staff, volunteers, agents, and any licensed physician, hospital, or medical facility selected by the camp to provide or secure medical treatment deemed necessary for my child's health and safety as named on this form. This authorization includes emergency transportation, examination, treatment, hospitalization, surgery, anesthesia, and other medical procedures as recommended by qualified medical personnel. I understand that reasonable efforts will be made to contact my designated emergency contact before treatment is administered when circumstances permit. However, I acknowledge that emergency medical treatment may be necessary before contact can be made. I agree to assume responsibility for any medical expenses incurred as a result of treatment provided on behalf of my child.

**Assumption of Risk and Liability Release:**

**For Parent/Guardian:**

I understand that participation in camp activities involves inherent risks. I voluntarily assume these risks and agree to release and hold harmless Faith Baptist Youth Camp, its sponsoring churches, staff, volunteers, and representatives from liability arising from my child's participation. I certify that my child is in good physical

condition and able to participate in the entire camping program other than the activities listed as “restricted.”

**Camper Behavior Agreement:**

**For Parent/Guardian:**

I understand that my child is expected to follow camp rules and may be dismissed for misconduct without refund. I have read the Rules and Dress Code and agree for my child to abide by them.

**Photo and Media Release:**

**For Parent/Guardian:**

I grant permission to Faith Baptist Youth Camp to use photographs, video recordings, and audio recordings of my child for ministry, website, and publication purposes without compensation.

**(Optional)**

Yes  No

Initials: \_\_\_\_\_

**Consent and Liability Waiver:**

We have read and agree to the Medical Emergency Authorization, Assumption of Risk and Liability Release, Camper Behavior Agreement, Photo and Media Release (optional), and sign this authorization, agreement, and release freely and voluntarily without any inducement.

**Every camper must be chaperoned by their designated counselor at all times. Each church is responsible for their own campers. Each church, parent or legal guardian, and camper will not hold Faith Baptist Church and Faith Baptist Youth Camp liable for neglect of their responsibility.**

**I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages whether known or unknown, foreseen or unforeseen. I HAVE CAREFULLY READ THIS CONSENT FORM AND LIABILITY WAIVER, FULLY UNDERSTAND ALL OF ITS TERMS, UNDERSTAND THE RIGHTS THAT MY CHILD AND I FORFEIT BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

**Camper Signature: \_\_\_\_\_**

**Parent or Legal Guardian Signature: \_\_\_\_\_**

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