



Camper Registration and Participation Agreement

We are excited about your interest in the 2019 Youth Camp! Please take a moment to complete this registration form.

This completed and signed Camper Registration and Participation Agreement constitutes a request on behalf of the Camper named below to participate in a Youth Camp ("Camp") sponsored by Grace Presbyterian Church and scheduled to take place at Tahquitz Pines Conference Center in Idyllwild, CA ("Tahquitz"), from Monday, June 24 through Friday, June 28 of 2019.

Camper Information

Last Name: _____ First Name: _____

Date of Birth: _____ Grade for Fall 2019: _____

Sex: Male Female

Names of Parents/Guardians: _____

Home Church: _____ City: _____ Denomination: _____

Are you a member? Yes No

Church Phone: _____ Pastor's Name: _____

Home Address: _____

City, State, Zip: _____ Home Phone: _____

T-Shirt Size (Adult Sizes; Circle One): S M L XL

Emergency Contact and Authorized Pick-Up Information

Emergency Contact: _____ Phone: _____

Email: _____ Relation to Camper: _____

At the conclusion of Camp and/or in the event of an emergency, any of the following adults at least 18 years of age (in addition to the Emergency Contact named above) are authorized to pick up the above-named Camper:

Person #1 Name: _____ Phone: _____

Relation to Camper: _____

Person #2 Name: _____ Phone: _____

Relation to Camper: _____

Medical Release Agreement and Parent/Guardian Consent

The undersigned represents and acknowledges that the above-named Camper carries and is covered by his/her own medical insurance. Tahquitz and Camp staff are safety conscious and follow appropriate safety procedures, and in the event of injury or illness EVERY EFFORT WILL BE MADE TO CONTACT THE EMERGENCY CONTACT NAMED ABOVE. The undersigned authorizes Camp staff to administer first aid, and/or consent to medical treatment where, in the judgment of Camp staff, this becomes necessary.

The undersigned further authorizes Camp staff to receive physical custody of the Camper upon completion of any treatment. The health information on this form will only be shared, as needed, with Tahquitz group leaders, Camp staff, and medical professionals to safeguard and support the Camper. This information will not be publicly disseminated or released to any outside organization.

Camper's Health History

The undersigned Parent/Guardian represents that the above-named Camper is capable of participating in Camp activities and will not participate in any activities prohibited by said Parent/Guardian.

Describe any relevant health issues:

List any allergies:

List any other conditions, activity restrictions, or special-care needs:

Provide the name and dosage of any medications that the Camper is required to take *:

*Please note: Camp leaders must be informed of ANY PRESCRIPTION MEDICATIONS BROUGHT BY YOUTH, with clear directions as to proper use and dosage. If medication is "as needed," each Camper must understand the symptoms of his/her condition(s) and know when to ask Camp staff for help.

There will be a well-stocked first aid kit on hand for all activities. The following is a comprehensive list of the medications, ointments, and treatments available at Camp as needs arise. Please initial next to each treatment that Camp staff and leaders are NOT authorized to administer to this Camper. Where considered necessary in the judgment of Camp staff, all other treatments below will be administered according to manufacturer's packaging. Any medication NOT authorized will NOT be administered under any circumstances.

- Benadryl
- Acetaminophen
- Ibuprofen
- Visine Eye Drops
- Hydrogen Peroxide
- Antibiotic Ointment (Neosporin or Generic)
- Cough Drops
- Tums Antacid Tablets
- Loperamide (Maalox/Imodium)
- Insect Sting Relief
- Calamine Lotion
- First Aid Ointment/Gel
- Insect Repellent

Code of Conduct

It is expected that all Campers will conduct themselves in a Christian manner at all times during the Camp. Where, in the judgment of Camp staff, and after being warned against such, a Camper defiantly continues in inappropriate conduct or language, presents significant behavioral problems, or engages in particularly egregious actions that could endanger himself or others, the Camper may be dismissed from Camp. In such cases, a Parent/Guardian will be requested to pick up the Camper within 6 hours, and no portion of the Camp fees will be refunded.

Parent/Guardian Consent and Release of Liability

Execution of this Agreement represents an assumption of risk by the Camper and a waiver of liability for any injuries incurred by the Camper from participation in activities at the Camp, and explicit indemnification for liabilities of every kind against Grace Presbyterian Church, Tahquitz, Camp staff, or any other person or organization connected with the supervision or operation of the Camp.

Grace Presbyterian Church retains the right and permission to publish photographs taken during Youth Camp for use in electronic or print publications.

The undersigned Parent/Guardian or adult Camper hereby acknowledges and represents that he/she is at least 18 years of age, has read this entire document, understands its terms and provisions, recognizes that this is a binding agreement, and is signing below voluntarily and in full cognizance of these facts.

Name of Parent/Guardian (or Camper if over 18): _____

Signature of Parent/Guardian (or Camper if over 18): _____

Date: _____

For more information visit gracepresbyterian.net/youth-camp or call 714.692.2390.

Please mail the completed form, along with a check (\$300 before May 15, \$325 after May 15) made payable to Grace Presbyterian Church, to:

**Grace Presbyterian Church
23101 La Palma Ave.
Yorba Linda, CA 92887**