



# STUDENT/ADULT REGISTRATION FORM

**INSTRUCTIONS: Complete the Registration form in its entirety for each person attending. All requested information is applicable. Type or print legibly in Dark Ink.**

Name: \_\_\_\_\_  
First Middle Last (indicate name used)

Mailing Address: \_\_\_\_\_  
Street City State Zip

Birth Date: \_\_\_\_\_ Grade (Spring 2019): \_\_\_\_\_ Sex: (M/F) \_\_\_\_\_  
Mo. Day Year

Phone Number: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Cell Provider: \_\_\_\_\_

Have you been convicted of a felony:  YES  NO If yes, explain: \_\_\_\_\_

Name of Church or Group with whom you are attending: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Parent / Legal Guardian: \_\_\_\_\_ Relationship to You: \_\_\_\_\_

Parent / Legal Guardian Phone Number: Daytime (\_\_\_\_\_) \_\_\_\_\_ Evening (\_\_\_\_\_) \_\_\_\_\_ Other (\_\_\_\_\_) \_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

## AGREEMENT TO ATTEND, PARTICIPATE, ASSUMPTION OF RISK AND RELEASE OF LIABILITY

I, and my parents or legal guardian (if a minor), am/are fully informed about and aware that during my stay at Glorieta Camps, Glorieta, NM also known as M3 Glorieta in connection with an event of the Southern Baptists of Texas Convention (SBTC), certain risks and dangers will occur. These include, but are not limited to, the hazards that arise from being in a wilderness area, the forces of nature and other hazards arising out of the content of this program which include, but are not limited to, volleyball, soccer, soft-ball, basketball, archery range, wilderness hiking, swimming, use of watercrafts, and a challenge course which has a climbing wall, zip lines, high and low elements, and a team power pole. In consideration of M3 Glorieta and SBTC providing and my willingness to engage in these rigorous activities and a special environment,

I have and do hereby hold M3 Glorieta and SBTC their owners, officers, directors, trustees, agents, employees, and/or volunteers, harmless from any and all claims, liabilities, suits, actions, causes, damages or losses and demands of every kind and nature whatsoever, including without limitation, all costs and attorney's fees, which may arise from or in connection with my stay or participation in any activities arranged for me by my organization or my group leaders, M3 Glorieta or SBTC. Injuries may include, but are not limited to, emotional injuries, physical injuries, or death. The terms hereby shall serve as a release and assumption of risk for me, my heirs, executors, administrators, and for all members of my family. I authorize the use of my or my child's photograph or video on the M3 Glorieta or the SBTC website or brochures for camp updates and communication. In case of an accident or illness, I authorize M3 Glorieta's nurse or first aid personnel to examine, treat, or administer medications for any illness or injury to my child as deemed necessary.

In the event of an emergency involving my child and if I cannot be reached by telephone, I authorize such persons to obtain any medical care (including hospitalization, injection, anesthesia, and surgery) from a licensed, certified, or authorized health care provider for my child as deemed necessary. I accept sole responsibility for the payment of any medical care for me or my child. I hereby release, indemnify and hold harmless M3 Glorieta and the Southern Baptists of Texas Convention, their owners, officers, directors, trustees, agents, employees, and/or volunteers from and against any and all claims, liabilities, or damages arising from any act, omission, negligence, or gross negligence of any such health care provider or of M3 Glorieta, or the SBTC, their owners, officers, directors, trustees, agents, employees or volunteers.

I expressly agree that this release, waiver, and indemnity agreement is intended to be broad and inclusive as permitted by the law of the State of Texas and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. This release contains the entire agreement between the parties hereto and the terms of this release are contractual and not a mere recital. I further state that I **HAVE CAREFULLY READ THE FOREGOING RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN THIS RELEASE AS MY OWN FREE ACT.** This is a legally binding agreement, which I have read and have understood.

**X** \_\_\_\_\_  
**REQUIRED Student Camper's/Adult Signature**      **Date**

**X** \_\_\_\_\_  
**REQUIRED Parent or Legal Guardian Signature**      **Date**

# ADULT MEDICAL HISTORY AND AUTHORIZATION FORM

In the event of an accident or special health needs, it will be necessary for us to have the requested information. Please make certain that you have provided thorough and accurate medical information. It is recommended that you **attach a photocopy of your family medical insurance card.**

Name of Adult Camper: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_ Sex: (M/F) \_\_\_\_  
First Middle Last Mo. Day Year

Church: \_\_\_\_\_ City: \_\_\_\_\_ Dates at Glorieta: \_\_\_\_\_ to \_\_\_\_\_

Person to Notify in **Event of Emergency**: \_\_\_\_\_ Relationship to You: \_\_\_\_\_  
 Phone Number of Contact Person: Daytime \_\_\_\_\_ Evening \_\_\_\_\_ Other \_\_\_\_\_  
*If unable to reach above person:* Notify \_\_\_\_\_ Relationship to You: \_\_\_\_\_  
 Phone Number of Contact Person: Daytime \_\_\_\_\_ Evening \_\_\_\_\_ Other \_\_\_\_\_  
 Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Medical Insurance Co.: \_\_\_\_\_ Plan or Group #: \_\_\_\_\_  
 Insured ID or Member #: \_\_\_\_\_ Ins. Co. Phone #: \_\_\_\_\_

**MEDICAL INFORMATION**

Significant Allergies (specify)

Food: \_\_\_\_\_

Insect Sting: \_\_\_\_\_

Medicine/Drug: \_\_\_\_\_

Plant/Pollen: \_\_\_\_\_

Other: \_\_\_\_\_

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Special Diet: \_\_\_\_\_

Recent Surgery? \_\_\_\_\_

Date of last Tetanus Shot? \_\_\_\_\_ Immunizations Current? \_\_\_\_\_

Diseases, Chronic or Recurring Illness: (Check all that apply, explain)

Asthma: \_\_\_\_\_

Bleeding Disorder: \_\_\_\_\_

Dermatological Condition: \_\_\_\_\_

Diabetes: \_\_\_\_\_

Ear Infections: \_\_\_\_\_

Heart Defect: \_\_\_\_\_

Seizures: \_\_\_\_\_

Stomach Condition: \_\_\_\_\_

Emotional: \_\_\_\_\_

**HEALTH CARE AND CAMP PERMISSION— INITIAL & SIGN THE STATEMENTS BELOW.**

\_\_\_\_ I give my permission for first aid techniques and simple health care to be administered as the need arises. I understand in the event of any serious injury or illness on my part the camp officials reserve the right to seek professional medical attention including but not limited to consultation with medical director, EMS transportation, and hospitalization.

\_\_\_\_ I give permission for myself in consultation with the Camp Health Supervisor and/or the medical director's standing orders to take the following medications as indicated by checking below:

____ acetaminophen (i.e. Tylenol)	____ ibuprofen (i.e. Advil)	____ decongestant (i.e. Sudafed)
____ antihistamine (i.e. Benadryl, Claritin)	____ antihistamine cream	____ antibacterial ointment
____ antacid tablet (i.e. Tums)	____ additional medications as indicated/prescribed by the M3 Glorieta Medical Director	

I hereby attest that all information listed on this Medical Form is complete and accurate to the best of my knowledge that I am in acceptable health, physical ability, and emotionally ready to fully participate in camp. I grant my permission to participate in all activities associated with the enrolled event with the exceptions of those that are noted.

I, \_\_\_\_\_ give my permission to SBTC management, medical staff, and/or the group director to provide medical treatment that may be deemed necessary to insure my well-being. I, the undersigned, do hereby release and forever discharge all from any and all claims, demands, actions or cause of action arising out of damage or injury while participating in Glorieta Camps sponsored activities.

**X** \_\_\_\_\_  
**REQUIRED Adult Attendee/Participant Signature** Date Phone Number

# **SUPERVISION STANDARDS**

## **Supervision Standards**

The following are the basic supervision policies that will be observed. Each adult worker/volunteer must sign to confirm their intent to comply with the Supervision Standards listed below. If possible, SBTC leadership should also review these standards verbally with adult workers/volunteers prior to the event.

- No unmonitored one-on-one situations – at no time, shall any child be alone with only one worker/volunteer. Exceptions might be for counseling in a location where both the worker/volunteer and child can be observed at all times.
- No inappropriate touching of minors (for discipline or otherwise) and limited physical contact. Physical discipline is prohibited.
- Respect of privacy – respect the privacy of minors in situations like changing clothes, showers, restrooms, etc. Adults must protect their own privacy also in these situations. Using cameras of any kind are prohibited in these private environments.
- Monitoring – all activities must take place in rooms that can be observed. In addition, at times parents may also view children’s activities if they do so discreetly and do not disrupt the event in progress.
- Ratios – the appropriate numbers of adults will supervise minors of various age groups based on accepted standards.
- Peer-to-peer abuse – peer-to-peer abuse will not be tolerated.
- No forced participation – all recreational or physical activities are optional.
- If a participant’s behavior becomes detrimental to themselves or others, a report should be made to the SBTC staff member in charge of the event.
- All workers/volunteers will strive to be a Godly witness to minors, other workers, and parents.

In the interest of the safety for minor participants, I agree to make best efforts to comply with these supervision standards.

\_\_\_\_\_  
Worker/Volunteer Signature

\_\_\_\_\_  
Church Name

\_\_\_\_\_  
Date



## Staff / Volunteer Code of Conduct

We will **ALWAYS** be above reproach when interacting with campers both in and out of camp. Unfortunately, our world has become so stained that people are quick to jump to conclusions and assume inappropriate behavior. Our actions and intentions must always be pure and honoring to Christ. The subject of physical contact is so fragile with kids and should be taken with the utmost concern and seriousness by every staff member.

The following are guidelines for appropriate/inappropriate conduct with campers:

### Touch

#### **Appropriate**

- a. handshakes and high-fives
- b. side, short, congratulatory or greeting hugs
- c. arm around the shoulders
- d. piggybacks with young Campers

#### **Not Appropriate**

- a. Private back rubs, arm tickles, massages, etc.
- b. Touching of private parts (no exceptions!)
- c. touching a child in anger, disgust, or frustration
- d. frontal hugs, do your best to avoid and do not initiate
- e. sexual embraces
- f. lap and leg sitting
- g. kissing
- h. intimate wrestling
- i. tickling
- j. walking hand-and-hand with same gender

## Talk

<u>Appropriate</u>	<u>Not Appropriate</u>
<ul style="list-style-type: none"><li>a. Verbal praise for achievement or behavior</li><li>b. Verbal encouragement</li><li>c. Biblically based teaching (non-sexual)</li><li>d. Normal, healthy conversation</li></ul>	<ul style="list-style-type: none"><li>a. Compliments or questions relating to physique or body development</li><li>b. Sexual jokes, homosexual innuendoes, or bathroom humor</li><li>c. Swearing or vulgar language</li><li>d. Verbal harassment or abuse</li><li>e. Individual secrets or special gifts</li><li>f. Sexual coaching or conversation</li></ul>

## Territory

<u>Appropriate</u>	<u>Not Appropriate</u>
<ul style="list-style-type: none"><li>a. Public one-on-one interaction (*see policy below)</li><li>b. Group or public environments</li></ul>	<ul style="list-style-type: none"><li>a. Sitting or lying on a bed with a camper</li><li>b. Private one-on-one interactions</li></ul>

### **Modesty**

Staff or campers shall never "sit around" or "walk around" the cabin or cabin area without a towel or clothing covering private areas. Towels must be worn at all times ...going to and from shower. (No exceptions!) It is against policy to display sexual body parts intentionally. (even if it's a joke)

Removal of shorts, tops (for girls), or swimsuits will NOT be allowed for swimming and ANY time.

### **One on One's**

All one-on-one interactions with campers must be done in a public place with others visible and in a well lit area. (Must be seen, but not necessarily heard) A third person is always encouraged in these settings.

**Consequences:** Any infraction of the above policy will be immediate grounds for dismissal with no chance of re-hire. A violation of one of these policies could not only be misunderstood by campers/staff, but result in legal consequences from parents.

**For the safety of our campers, keep each other accountable in love.**

\_\_\_\_\_  
**Signature**

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

## **PARTICIPANT AGREEMENT FOR RELEASE AND ASSUMPTION OF RISK (ADULT PARTICIPANT)**

Please read this document carefully. It provides important information about the activities of Glorieta 2.0, Inc., a New Mexico corporation (“Glorieta 2.0”) and affects your legal rights in the event you suffer a bodily injury or other loss arising from your participating in Camp related activities or otherwise being on the premises of the Camp.

...  
In consideration of being permitted to participate in activities of Glorieta 2.0, use its facilities or visit its premises for any purpose, I acknowledge and agree to the following:

**Activities:** I understand and acknowledge that activities of Glorieta 2.0 in which I may participate, on the premises of the Camp or elsewhere, may include, among others, the following: kayaking, canoeing, swimming and other water activities, hiking, backpacking, archery and riflery, fishing, volleyball, basketball and other playground and gym games, rock climbing, rappelling, exploring caves (spelunking), zip lining, participating in “paint ball” games, mountain boarding (riding down dirt and loose-rock inclines), and riding mountain scooters (not motorized) and mountain bikes. “Water activities” include blobbing, a water slide and swing and a zip line. I may also engage in competitions involving running, swimming, cycling, and in other activities using the camp premises and facilities, organized and supervised by the Camp or spontaneous and without participation of Camp staff. Transportation using Camp vehicles and drivers may be provided to activities and events on and off the Camp premises. I agree to abide by rules and regulations of the Camp and to follow instructions of staff.

**Risks of Activities and Premises:** I understand and acknowledge that, whether I am supervised or not, there are risks associated with the

activities of the Camp and moving about its premises and other activity sites. These risks include the following: those ordinarily associated with rigorous outdoor activities, including the unpredictable forces of nature; rugged and sometimes unstable terrain; a remote environment that may cause significant delays in obtaining emergency medical care; falls, breaks, and sprains; contact with harmful plants and animals; vehicle collisions and accidents; drowning and near-drowning; errors in judgment and conduct, including negligence, of staff, co-participants, and others; the failure of gear and equipment; and other risks of property damage, bodily injury, and death. I understand and acknowledge that some of these risks are inherent in the activities and the premises and, without undertaking these risks, the Camp experience would lose its value and appeal.

**Assumption of Risks:** I acknowledge and assume all risks of the activities of Glorieta 2.0, wherever they may take place, and all risks of being on and moving about the premises of Glorieta 2.0 and any other sites of its activities. I acknowledge and assume all risks whether or not the particular risk has been described in the paragraph above and whether or not the particular risk is inherent in the activities undertaken or the premises.

**RELEASE: I AGREE TO WAIVE, RELEASE, AND NOT TO SUE GLORIETA 2.0 AND OR THE SOUTHERN BAPTIST OF TEXAS CONVENTION(SBTC) ITS OWNERS, DIRECTORS, OFFICERS, AGENTS, AND STAFF (EMPLOYEES AND VOLUNTEERS) ("RELEASED PARTIES") FOR ANY PROPERTY LOSS, BODILY INJURY, DEATH OR OTHER LOSS SUFFERED BY ME THAT IS IN ANY WAY RELATED TO MY BEING ENROLLED IN OR PARTICIPATING IN ANY ACTIVITIES OF GLORIETA 2.0 OR MY PRESENCE ON THE PREMISES OF GLORIETA 2.0 OR ANY OTHER ACTIVITY SITE.**

**INDEMNITY: I FURTHER AGREE TO INDEMNIFY AND HOLD HARMLESS**

**(THAT IS, TO PROTECT AND DEFEND, AND PAY DEMANDS AND JUDGMENTS, INCLUDING COSTS AND REASONABLE ATTORNEYS' FEES) THE RELEASED PARTIES FROM ANY CLAIM OF PROPERTY LOSS, BODILY INJURY, DEATH OR OTHER LOSS SUFFERED, OR CAUSED, BY ME THAT IS IN ANY WAY RELATED TO MY ENROLLMENT OR PARTICIPATION IN ANY ACTIVITIES OF GLORIETA 2.0 AND OR THE SBTC OR MY PRESENCE ON THE PREMISES OF GLORIETA 2.0 OR ANY OTHER ACTIVITY SITE.**

**THESE AGREEMENTS OF RELEASE AND INDEMNITY INCLUDE CLAIMS OF NEGLIGENCE BY ANY RELEASED PARTY BUT NOT CLAIMS OF RECKLESSNESS OR INTENTIONALLY WRONGFUL CONDUCT.**

**Other:**

I understand and agree to the terms of this Participant Agreement and agree that the protections it provides to the released and indemnified parties are intended to be as broad and inclusive as permitted by New Mexico law.

· I hereby consent to Glorieta 2.0 and or the SBTC taking or using any photographs of me or recording of me, whether audio or video, while on the premises of Glorieta 2.0 or any other activity site. I agree that Glorieta 2.0 and or the SBTC may use any such photographs or recordings of me without providing me any compensation or remuneration.

· Glorieta 2.0 is authorized to provide or obtain medical care for me, including transportation to a medical facility, as it deems appropriate or necessary and at my expense, and to exchange medical information about me with any third-party care providers.

· To the extent a claim asserted by me against a Released Party is dismissed or deemed by a court of competent jurisdiction to be without merit, I agree that the Released Party may recover from me his or her



costs, including reasonable attorneys' fees, incurred in defending the claim.

- I acknowledge and agree that any suit I bring against a Released Party shall be brought exclusively in Santa Fe County, New Mexico , and that the laws applicable thereto shall be those of the State of New Mexico without regard to any conflict of law principles.

- This Participant Agreement may be amended only by a written instrument signed by a duly authorized representative of Glorieta 2.0.

- Should a court of competent jurisdiction find any provision of this Participant Agreement to be invalid, illegal, or unenforceable, I agree that the remainder of this Participant Agreement shall nevertheless remain in full force and effect.

**Duration of this agreement:** This Agreement pertains to visits to any activity or program of "Glorieta 2.0 Inc" occurring at any time during the next year (365 days) from the date this agreement is signed. Visits and participation in activities and programs thereafter, if any, will be the subject of another agreement.

I acknowledge and agree that this Agreement is intended to be binding upon my heirs, estate, executors, guardians, administrators, legal representatives, and assigns.

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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