

GO Camp NTC Local. Mobile. Together. www.gocampntc.org

Medical Release

I, _____, natural parent or legal guardian of _____, do by these presents, make, constitute and appoint the **CAMP DIRECTOR**, his/her agent as my true and lawful attorney to act for me and in my name, place and stead; and to do any, every and all acts and exercise any, every and all powers that I might or could do in giving consent to emergency medical treatment for my minor child that he shall deem proper or advisable to do or exercise on my behalf.

This Power of Attorney and appointment of the **CAMP DIRECTOR** as my attorney-in-fact for the limited purpose of consenting to emergency medical treatment for the above-named minor child shall not terminate on my physical or mental disability subsequent to the date of execution hereof.

Signature of Camper (if 18 years or older): _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

Release & Covenant Agreement

We at GO Camp want to inform you of our safety precautions at camp. We feel that we have hired and recruited competent and knowledgeable staff. Your camper will be required to wear safety equipment if at waterfront events, on the ropes challenge course, or involved in any other activity requiring protective gear. Even with safety equipment, we at GO Camp want you to realize that any outdoor camping and recreational activity has inherent dangers that no amount of care, caution, instruction, or expertise can eliminate.

- In the signing of this document, I hereby certify that I give permission to my son or daughter to participate in the camping program of the North Texas Conference – United Methodist Church.
- I understand that pictures and videos are taken at camp and posted to the GO Camp website. I hereby give permission for the use of such pictures and videos of my camper for the promotion of camp.
- I understand that if the GO Camp staff deems my child's behavior is inappropriate for the camp environment, he/she may be sent home. No refund will be issued. (*Examples of inappropriate behavior include but are not limited to: drugs, violence, alcohol, bullying, weapons...*)
- I will be held financially responsible for any damages to facilities caused by my camper.
- I hereby affirm that I understand the risks of camping and recreational activities at GO Camp.
- I understand that the terms herein are contractual and not a mere recital.
- I have signed this document as my own free act and in consideration of the agreement by GO Camp to accept my camper for participation in a 2019 camp session.
- IT IS MY INTENTION BY EXECUTION OF THIS DOCUMENT TO COVENANT NOT TO SUE GO CAMP, AND TO RELEASE GO CAMP, THE STAFF, THE NORTH TEXAS CONFERENCE OF THE UNITED METHODIST CHURCH, AND ALL OTHERS ACTING FOR OR ON BEHALF OF GO CAMP FROM ALL LIABILITY WHATSOEVER, FOR PERSONAL INJURY, OR INJURIES TO PROPERTY, REAL OR PERSONAL, CAUSED BY, OR ARISING OUT OF CAMPING AND OTHER ACTIVITIES SPONSORED BY BCCC.

Camper Name _____ Print _____ Camp Attending _____

Parent/Guardian Name _____ Print _____

Parent/Guardian _____ Signature _____ Date _____

Phone # _____ Email _____

Any food allergies or medications list here:-
