

DIXIELAND LEADERSHIP CAMP

Parental Consent and Release of Liability Please Print and Provide All Information Requested

IMPORTANT: THIS DOCUMENT CONTAINS A RELEASE OF LIABILITY. YOU ARE ADVISED TO REVIEW IT CAREFULLY.

Name of Camper: _____ Camper's Date of Birth: _____

Camp Location: Manderley Christian Camp & Conf Center Dates Camper Will Attend Camp: June 11-18, 2022

I understand and agree that participation in the Dixieland Leadership Camp ("Camp") is a privilege to which my minor child named above ("Camper") is not otherwise entitled. In consideration for that privilege, I am signing this Parental Consent and Release of Liability.

Consent to Attend Camp

I hereby give permission for Camper to attend and participate in the Camp.

Consent to Medical Treatment

If Camper experiences an injury or illness, or has other medical needs, I authorize the Camp's employees, volunteers, and agents to make such arrangements for Camper's health and safety, including but not limited to first aid, emergency medical care, ambulance or other transportation to a hospital, medical office, or clinic, testing and examination, and hospital care, and other medical care and treatment (including dental care) as they feel are appropriate in the circumstances. I further agree that I am fully responsible to pay all charges and expenses relating to such care, transportation and treatment and I hereby fully release DLCL and its directors, officers, employees, volunteers and agents from any claims, including claims for medical charges, prescription costs and other expense, I might have as a result of such care, transportation and treatment. My signature below also serves to indicate my willingness for my Health Insurance Company (please provide details in the **Medical Information** section) to be billed for any and all medical fees and services should they be needed. I agree that I will pay all charges and expenses not covered by insurance.

Medical Information

Medical Insurance Co.: _____ Policy Number: _____

(Please attach a copy, front and back, of your insurance card)

Address: _____

Phone: (____) _____ Insured's Name: _____

Doctor's Name: _____ Phone: (____) _____

Date of last tetanus: _____ Date of last physical: _____

List any medical or food allergies of **Camper** (please write "None" if applicable): _____

Will Camper be under any medication* while at camp? Yes No If yes, please provide details: _____

***All medications are to be in original containers with prescription attached and given to the camp nurse.**

The camp nurse has our (my) permission to provide Camper with non-prescription medicines as deemed necessary.

Yes No Please list any over-the-counter medicines that should **not** be given to **Camper**. _____

Does **Camper** have any physical condition or limitations that would restrict participation in any camp activities?

Yes No If yes, please provide details: _____

Release of Liability

Prior to Camper's participation in Camp activities, I acknowledge that involvement of Camper in the Camp may involve risk of property damage and of personal injury, illness or even death of Camper, including but not limited to the risks arising from transportation-related activities, recreational activities, accidents in the outdoors and rustic facilities, adverse weather conditions, and injuries and illness as a result of food-borne illnesses and allergic reactions. In addition, I understand that there may be other risks inherent in Camp activities of which I may not be presently aware.

By signing this Parental Consent and Release of Liability, I warrant that Camper is fully capable of safely participating in all Camp activities, and I expressly assume all risks of Camper's participation, whether such risks are known or unknown to me at this time. I further generally release Dixieland Leadership Camp, Inc. and its directors, officers, employees, volunteers, and agents, and other campers at the Camp, from any and all claims that I or Camper may have against any of them as a result of property damage or personal injury, illness or death of Camper as a result of participation in Camp activities, whether on or off Camp grounds. I agree that this release includes the ordinary, special and inherent risks described above, and other risks that I may not

foresee or be aware of at this time. This Release of Liability is given on behalf of myself, Camper, and the heirs, family, estate, administrators, executors, personal representatives and assigns of me and Camper.

Other Releases and Acknowledgements

Bubble Soccer - Waiver of Liability, Assumption of Risk, and Indemnity Agreement*

***Waiver:** *In consideration of being permitted to participate in any way in "Bubble Soccer" or "Bubble Ball," hereinafter called "The Activity", I, for my child, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue Dixieland Leadership Camp or Ft. Bluff Camp, its officers, employees, and agents from any and all liability from any and all claims, including the negligence of Dixieland Leadership Camp and Ft. Bluff Camp, its officers, employees and agents, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in The Activity.

***Assumption of Risks:** *Participation in The Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks include 1) minor injuries such as scratches, bruises, and sprains 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death.

Other risks include, but are not limited to, slips, falls, contact with other participants, negligent or wanton acts of other participants, any defects or condition of premises or equipment, insects or wild animals, the effects of the weather including high heat, cold temperatures, storms, and/or humidity.

I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent in The Activity. I hereby assert that my child's participation is voluntary and that I knowingly assume all such risks.

***Indemnification and Hold Harmless:** *I also agree to INDEMNIFY AND HOLD Dixieland Leadership Camp and Manderley Christian Camp, HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement in The Activity and to reimburse them for any such expenses incurred.

Rules and authority: I agree to abide by the rules and instructions of the referee at all times during the Activity, including but not limited to the referee stopping my participation of the activity at any time for any reason.

I understand that, while Camper is participating in Camp activities, photographs, film, audio recordings and videotape of Camper may be taken for use in brochures, videos, releases to the press, and various DLC publications and other work product. I do hereby irrevocably grant DLC permission to record, display and/or reproduce my child's name, likeness and voice on audio and/or video tape, film or other media, to edit and otherwise modify such media at its discretion, to incorporate the media into any work product, and to use or authorize the use of such media or any portion thereof in any manner or media or by any means, methods or technologies now known or hereafter to be known.

I understand that DLC does not provide transportation to or from the Dixieland Leadership Camp program and do hereby take responsibility for either providing or arranging for transportation of Camper, and for ensuring that Camper will arrive and depart by the scheduled dates and times.

I will ensure Camper only brings clothing that adheres to the Camp Dress Code or similar policy included as part of this package or to be sent in the acceptance package. If Camper fails to abide by established rules, standards of conduct and/or Camp Dress Code, Dixieland Leadership Camp staff reserve the right to send Camper home. If it becomes necessary to send Camper home, I hereby agree to provide transportation or to make travel arrangements for Camper and to assume the cost of these expenses.

To the extent any provision of this document is found to be unenforceable, such provision shall be deemed severable and shall not affect the enforceability of any other portion of this document, and shall be reformed to be in compliance with the law and construed to most nearly reflect the intent of the parties.

I represent and warrant that I am a parent or legal guardian of the Camper named above and have the full power and authority to enter into this Parental Consent and Release of Liability on behalf of the Camper. By signing below, I acknowledge that this document has been read and understood by me, and also represent that all information provided is accurate. Each legally responsible parent/guardian is required to sign below.

By signing below, I ALSO agree I have read the Policies and Procedures of DLC and the DLC Survival Kit and understand failure to comply or any violation is a serious matter which will require careful evaluation to determine if the camper may remain at DLC.

1st Parent or Guardian signature Parent or Guardian signature

2nd Parent or Guardian signature Parent or Guardian signature

Name Printed

Name Printed

Date Signed

Date Signed

Daytime Phone

Daytime Phone

Evening Phone

Other Phone

Administration Use Only:

Date: _____ Check #: _____ Amount: \$ _____