



MEDICAL & LIABILITY RELEASE

MALE FEMALE STUDENT LEADER
CHURCH _____
AGE _____ DATE OF BIRTH ____ / ____ / ____
DATES OF CAMP ____ / ____ / ____ - ____ / ____ / ____

NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
PARENT E-MAIL ADDRESS _____

HEALTH INFORMATION

In case of emergency notify: _____ Relationship _____
Home Phone _____ Work Phone _____ Cell Phone _____
Family Doctor _____ Phone _____
Insurance Carrier _____ Policy Number _____

Are there any medical restrictions or conditions we should know about? _____ If yes, please explain and indicate nature and extent. _____

List all medications brought to camp along with dosage and frequency. _____

All medications must be turned in to the infirmary. Medications must be in original container, labeled, with specific written dispensing instructions by a parent, legal guardian, or medical doctor.

May your child be given Tylenol? ____ Advil? ____ Pepto Bismol? ____ Cough Syrup? ____ Cough Drops? ____
Is your child allergic to any medications or foods? ____ If yes, please explain: _____
Date of last tetnus shot: _____

Camper insurance begins where individuals health and accident insurance policy terminates. It is only valid when other insurance has been extended to its limits. In case of no personal policy, Ponderosa Pines' policy will provide coverage within its limits for accidents only (\$1000 per injury).

In case of emergency, I hereby give permission to the physician selected by the camp to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child as named above. It is understood that the camp and doctor will make every effort to contact the parent/guardian of the child before treatment.

PHOTOGRAPHY

Registering for camp gives Ponderosa Pines permission to use your child's likeness in print, video, or on the internet for promotional purposes.

OFF-SITE TRANSPORTATION

Registering for camp gives Ponderosa Pines permission to transport your child to off-site activities if applicable.

DISCIPLINE POLICY

I understand that my child comes under the authority and reasonable guidelines of Ponderosa Pines and may be sent home in the event of a violation of the rules. If this should occur, I agree to come and get my child immediately.

Signature of Parent, Guardian, or Adult Leader

Signature of Child

BOTH SIDES MUST BE FILLED OUT AND SIGNED

PONDEROSA PINES CHRISTIAN CAMP, INC.

Participation, Release, Waiver & Indemnity Agreement

WHILE PONDEROSA PINES CHRISTIAN CAMP MAKES EVERY EFFORT TO PROVIDE A SAFE AND PLEASANT ENVIRONMENT FOR YOUR CHILD, WE DO REQUIRE THAT THIS PARTICIPATION AGREEMENT BE READ, FILLED OUT, SIGNED AND DATED BY THE PARENT OR LEGAL GUARDIAN OF EACH CHILD UNDER 18 YEARS OF AGE WHO WISHES TO PARTICIPATE IN THE ACTIVITIES WHICH OCCUR AT PONDEROSA PINES.

I, the undersigned, give permission for my son or daughter to participate in the activities that occur at Ponderosa Pines Christian Camp, and on or around Ponderosa Pines. These activities include, but are not limited to, swimming in the pool, hiking, archery, frisbee golf, teather ball, horse shoes, and strenuous competition games. I grant this permission with full knowledge that I accept full responsibility for any injury or accident that may occur.

Although Ponderosa Pines Christian Camp has taken reasonable steps to provide equipment and skilled employees so your child can participate in activities for which he/she may not be skilled in, we now remind you that these activities are not without risk. Certain risks cannot be eliminated due to the Camp’s rural setting and without destroying the unique character of those activities. The same elements that contribute to the character of these activities can be cause of loss or damage to your property, accidental injury or illness or, in extreme cases, permanent trauma or death. We do not want to frighten you or reduce your enthusiasm for these activities, but we do think it is important for you to be informed and know in advance about inherent risks.

I, on behalf of myself, my children, my assigns and my estate, agree to release and hold harmless Ponderosa Pines Christian Camp, Inc., its officers, Board,agents or employees, for any and all claims for injuries, causes of action, or liability related to my child’s participation in any activity occurring at Ponderosa Pines Christian Camp, or on or around Ponderosa Pines. This release does not apply to intentional and/or willful acts of misconduct by Ponderosa Pines Christian Camp or any of its officers, Board, agents or employees.

Should Ponderosa Pines Christian Camp, or anyone acting on their behalf, be required to incur attorneys’ fees and costs to enforce this agreement, I agree to indemnify and hold Ponderosa Pines Christian Camp harmless for all such fees and costs.

By signing this document, I acknowledge that if anyone is hurt or property damaged during my or my child’s participation in these activities, I and/or my child may be found by a court of law to have waived any right to maintain a lawsuit against Ponderosa Pines Christian Camp on the basis of any claim which has been released herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and agree to be bound by its terms.

Parent, Guardian, or Leader Signature _____

(You may sign your own Release if you are 18 or older)

Print name _____

Date _____ Relationship to child _____

Camper’s Name _____

PONDEROSA PINES CHRISTIAN CAMP, INC.

PO Box 1247 • Running Springs • CA • 92382

Phone (909) 867-7037 • Fax (909) 867-3991 • www.pondo.org

Fill out and return to you church registrar. If you have no church registrar, please bring to camp.

BOTH SIDES MUST BE FILLED OUT AND SIGNED