CentriKid camps Participant Form

Group Leaders: Bring ONE notarized copy of this document to registration and keep a photocopy for yourself to have with you in case of emergency at camp. YOU MUST attach a photocopy of insurance card (front & back).

Church Information:

CentriKid Venue: _____ Name of Church: _____
Group Leader: _____ Group Leader's cell # at camp: (_____)_____
Church Address:_____ City: _____ ST: _____ ZIP: _____

Camper's Info:

Participant Name_____ Age_____
Date of Birth:___/___/____ Grade Completed (*campers only*): _____
Address: _____City: _____ ST _____ ZIP_____
In case of an emergency notify:_____
Relationship to participant:_____
Phone Numbers - Home: (___)_____ Work: (___)_____
Mobile: (___)_____ Other:(___)_____

Medical Profile

Generally, the participant's Health is: (Check One) ☐Excellent ☐Good ☐Fair ☐Poor
If Fair or Poor, please explain the condition:_____

List any medical difficulties which are currently being treated:_____

Check any of the following that cause you problems & explain:
□ Asthma □ Sinusitis □ Bronchitis
□ Kidney Trouble □ Heart Trouble □ Diabetes
□ Dizziness □ Stomach Upset □ Hay Fever
_____
_____
_____

List any medicines or substances to which you are allergic: _____
List any previous operations or serious illnesses_____
List any medications you are currently taking: _____
List any special diet or special needs:_____
Childhood Diseases: ☐Chickenpox ☐Measles ☐Mumps ☐Whooping Cough ☐Other:_____
Date of Tetanus Immunization: ___/___/___

You MUST attach a photocopy of insurance card (front & back).

If a camper requires medical attention while at camp, the camper is responsible for the cost. If the camper does not have insurance the sponsoring church will be the financially responsible party. If the medical attention is needed because of an accidental injury at camp, LifeWay provides a limited insurance policy that applies to those costs.

Permission, Acknowledgements, Release, Indemnity

My permission is granted for the camp or event director, church official, any camp or event staffer, or adult present or in charge of first aid, to obtain necessary medical attention in case of sickness or injury to me or my child. Also, I understand that as a Participant, I or my child may be photographed or videotaped during normal camp or event activities, and these photos/videos may be used for promotional purposes. I, the undersigned, do hereby verify that the above information is correct, and I do hereby release and forever discharge LifeWay Christian Resources of the Southern Baptist Convention, the CentriKid Camp Venue, the Church, camp or event sponsors and state conventions and their employees ("Released Parties") from any and all claims, costs, demands, actions or causes of action, past, present or future arising out of any damage or injury in connection with my or my child's employment by or participation in this camp or event. I agree to indemnify the Released Parties for any and all claims, demands, damages, injuries, costs, suits or causes of action, past, present, or future, arising out of or caused by myself or by my child while participating in this camp or event or while on property leased or owned by any of the Released Parties.

Assumption of Risk. I am aware of the risks associated with participation in the above event and do hereby voluntarily assume full responsibility for any risk of loss, property damage or personal injury, including death, that may result from participation in event activities.

Recreation– The recreation programs at summer event venues strive to offer fun, safe, and challenging activities that engage the whole person—body, mind and soul. Program staff are trained and as a team committed to your rewarding experience with safety as their highest priority. They have done everything possible to mitigate any risks involved in their recreation programs. However there are inherent risks to participation in recreation activities, including but not limited to, initiative games, high and low challenge course, outdoor education, paintball and aquatics (not available at every CentriKid venue). You could experience any of the following – elevated heart and respiratory rates, uncomfortable group dynamics, climbing or descending unpredictable and possibly slick or uneven terrain, crossing narrow wires and logs, jumping, running, climbing/descending steep rock faces, traveling long distances in remote settings, carrying weight on your backs and shoulders, unforeseen forces of nature or weather, any of which could result in injury/illness that could result in loss of life, limb, and/or property. For more detailed information about the recreation programs offered at CentriKid Camp Venues, go to www.lifeway.com/centrikid and follow the specific link to the camp venue's Group Leader Information.

Understanding. I represent and acknowledge that I have completely read and understand this document and all its terms and all matters referred to herein, and I signed voluntarily as my free act and deed, that I have had an ample opportunity to obtain the advice of counsel and that, by signing this document, I understand that I am relinquishing legal rights and remedies that may have otherwise been available to me. I understand that this Waiver and Release shall be construed as broadly and inclusively as is permitted by applicable law and agree that if any portion of this document is held invalid, the remaining shall continue in full force and effect. To the extent the restriction on filing lawsuits is deemed unlawful, I agree to submit any Claims to a Christian conciliation/mediation organization for binding resolution.

Affirmation. Participant affirms that he/she has not been convicted of nor received a deferred adjudication for: a misdemeanor or felony under any state or federal statute regarding crimes against persons, sexual offenses, or violent offenses under the "Participant Name" submitted on this document or any other name or alias.

Copy to Camp Venue. It is understood and agreed that a copy of this form shall be treated as authentic and binding as the original and that a copy of same shall be provided to camp venue.

Complete and sign below (*participants who are minors per your state statute require Parent/Legal Guardian signature*).

Participant's Signature: (only if 19yrs of age or older) _____ Date: ___/____/___

Parent/Guardian Signature: _____ Phone: ( ) _____ Date:___/___/___

Notary Acknowledgement:

State of _____ County of _____ On _____ before me,

_____, Notary Public, personally appeared

_____ who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the state that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Notary signature: _____

My commission expires: _____