



Canoe Creation SUMMER CAMP REGISTRATION

2015 DATE CHOSEN: (circle one) July 10-12/ July 14-16/ August 4-7

Family Camp Pollywogs River Rangers

The organizers of Canoe Creation require this registration form to be completed and signed by all attendees if the participant is an adult or if the participant is a minor, by his/her parent or guardian. **No participant will be permitted to attend without a completed and signed form.** Use extra pages if needed.

PARTICIPANT(s) NAMES (Circle Life Jacket Size - / Small (under 90 lbs)/ Adult / Xtra Large)

(please print): _____ Age _____ **S A X** _____ Age _____ **S A X**
(PLEASE CIRCLE THE NAMES OF CHILDREN THAT ARE NOT GOOD SWIMMERS)

_____ Age _____ **S A X** _____ Age _____ **S A X**

Address: _____ City _____ State _____ Zip _____

Phone: _____ Phone 2 _____ Email _____

IN CASE OF EMERGENCY NOTIFY (please fill both):

Name: _____ Phone(H) _____ (W) _____

IN CASE OF MEDICAL EMERGENCY CONTACT OUR FAMILY PHYSICIAN

Name: _____ Phone(H) _____ (W) _____

Parents/Guardians please describe **any conditions, allergies, behavioral difficulties, or activity or food restrictions** that you feel are necessary to advise outing organizers for the safety or well-being of your child. Use additional pages if needed.

Medical Insurance ID Number _____

Insurance Company _____ Group Number _____

Release of Liability & Participant Agreement

I acknowledge that certain hazards and dangers are inherent in outdoor activities and programs. I hereby release Canoe Creation, the owners of the properties on which activities are conducted and the chaperones or organizers of the Canoe Creation outing from any claims for personal injury or property damage arising from the participation in this Canoe Creation outing. The participant herein described has permission to engage in all outing activities described on this registration form except as noted.

I understand that an injury sustained by the participant while participating in Canoe Creation outings will not be covered by insurance provided by the organizers, Canoe Creation or the owners of the locations on which they visit in the course of the outing. This agreement is made in Christian trust and in good faith that the organizers, chaperones, and members of Canoe Creation

ministry team will take all precautions in safety. I am also trusting that Canoe Creation staff will respect the wishes of the parents (or guardians) of the participants, and will put the well being of all of the participants as the highest priority.

Signature: _____ Date: _____

Parent/Guardian SIGN HERE

I (**the Participant**) understand and agree to abide by any restrictions placed on my participation in Canoe Creation activities and agree to abide by rules set out by the organizers of the Canoe Creation outing. (Family group leaders agree to enforce agreement for all members listed above)

Signature of Participant(s) _____ Date _____

Participant(s) SIGN HERE

Medical Information

I authorize the chaperones or Canoe Creation to dispense the following for my participating child if needed during the course of the outing (please check all that apply):

| | | |
|-------------------------|-----------------|-----------------------------|
| Ibuprofen _____ | First Aid _____ | Epi-pen (you provide) _____ |
| Acetaminophen _____ | CPR _____ | Sunscreen _____ |
| Aspirin _____ | Benadryl _____ | Insect Repellent _____ |
| Other Medication: _____ | | |

The Participant (Parents check all that apply & add details on separate page if needed):

Is up to date on all vaccinations _____

Has had a tetanus shot (within 10 years) _____

Does not have a heart condition _____

Does not have any known severe allergic reactions _____ (if so, list them below)

Is able to swim _____

Has had poison ivy before _____

Does not have any known communicable diseases _____ (if so, list them below)

Circle any conditions that the participant is known to have (add others as deemed necessary):

Diabetes Frequent Headaches Asthma Epilepsy

Activities of Participants

Not all of these activities will be conducted on every outing;
Please circle any that you would **not** like your camper to participate in:

| | | | | |
|-------------|---------------|---------------|------------------|--------|
| Canoeing | Rappelling | Tree Climbing | River Clean-up | Hiking |
| Bible Study | Rock Climbing | Fishing | Campfire Cooking | Wading |
| Swimming | Nature Study | Edible Plants | Survival Skills | Caving |

Release for promotional photographs

We will be taking photographs or videos of the above mentioned activities and would like to request your permission to use any photos of your participant for promotional materials that Canoe Creation deems appropriate. **Circle One.**

Yes, you may use photos of the participant for promotional use.

No, please do not use photos of the participant for promotional use (a CD of your trip will not be available)