



Youth Registration/Release Form
LMC Celebration of Church Life June 10 – June 12

Student's Name _____

Youth Group Name/Church _____

Dates Attending Event _____

Birth Date _____

Home Phone _____

Grade _____ Age _____

Parent/Guardian Names _____

Parent/Guardian Email Address _____

Address _____

Emergency Contact Name & Phone Number _____

MEDICAL INFORMATION

Allergies _____

Special Dietary Needs _____

Medications being taken and dosage

Physical handicaps or limitations _____

IMPORTANT: Any youth who may require an inhaler or EpiPen **MUST** have them.

PLEASE SEND MEDICATIONS WITH YOUTH. ALL MEDICATIONS MUST BE IN THE ORIGINAL CONTAINER.

I give permission for my above-named child to participate in the Focus Youth Rally at Camp Hebron Friday June 10 – Sunday June 12, 2022. I release, indemnify and hold harmless LMC, church youth leaders, Camp Hebron and their staff, sponsors, advisors, volunteers, officers, directors, and agents from any and all liability, suits, claims, damages, and expenses relating to or arising from my child's participation in related activities, including but not limited to illness, injury, and property damage. In the event of an emergency, I hereby authorize adult leaders of this activity, as agent for me, to consent to any X-ray examination; medical, dental or surgical diagnosis; treatment; and hospital care including anesthesia advised and supervised by a physician, surgeon or dentist (as appropriate) licensed to practice under the laws of the state where the services are rendered, either at a doctor's office, urgent care, or in any hospital. I understand that organizers of the event cannot assume responsibility for medical expenses for my child and agree to pay any such expenses incurred with respect to such medical emergency. I expect to be contacted as soon as possible. I affirm that, to the best of my knowledge, the medical health information is correct. I give consent for my above-named child to be a part of any photograph that is taken at the event and will not expect compensation for or deny use of such. Intending to be legally bound, and to bind my child and my heirs, assigns, and personal representatives, I have signed below. I authorize this form to be photocopied and/or faxed for medical use. By my signature below, I verify that I am custodial parent or legal guardian of this child.

Signature of parent or legal guardian

Date _____

\$25.00 Registration Fee



Paid

Reference/Check No _____



Participant Release Form for Camp Hebron Climbing Wall

Certain health/medical information must be made known to the instructor(s) conducting your climbing wall experience, so that they can appropriately respond if necessary. This information will be held in confidence. **Each individual that will participate in the climbing wall must fully complete and return this form to Camp Hebron at the weekend's registration in order to participate. Failure to do so will forfeit your participation in the adventure activity.**

1. Name _____ Date of adventure activity _____ Age _____

2. Do you have any limiting physical, medical, and/or emotional conditions or limitations? YES____ NO____

If yes, please identify and explain:

3. Have you undergone a kidney transplant or had other surgery in the last two months? YES____ NO____

4. Are you currently seeking or have received care from a medical professional in the past for any of the following: YES____ NO____

Heart disease

High blood pressure

Pregnancy (currently)

If yes, please explain.

RELEASE OF LIABILITY/ and PUBLICITY RELEASE

I understand that aspects of Camp Hebron's adventure programs may be physically and emotionally demanding. I affirm that I am in good health, and that I am not under a physician's care for any undisclosed condition that bears upon my ability to participate in these activities. I recognize the inherent risk of injury or disability in these activities. I understand that each participant must assume the risk of injury that could result from any of these activities. I release Camp Hebron, all staff members, volunteers, and board of directors from all liability for any injury to me from participating in these activities. The participant grants Camp Hebron, Inc., and persons acting for or through them the right to use, reproduce, assign, and/or distribute photographs, films, videotapes, and sound recordings of myself, for use in materials they may create and distribute (unless instructions to the contrary are written below).

Signature of Parent (if participant is under 18 years of age) Printed Name of Parent Date

Signature of Participant Printed Name of Participant Date

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Signature of Participant Printed Name of Participant Date

Horsemanship Program Liability Release

I, the undersigned, represent that I am a legal adult or the parent or legal guardian of: (please print participant's name)

a participant in the horsemanship program at Camp Hebron.

Horsemanship programs are exciting and rewarding for participants. As a participant you will be challenged in many ways. It is our goal that through this experience you will build self-esteem, develop better communication skills, and learn about yourself in a new way. With these challenges there is a potential for injury. We are committed to safety and strive to do what we can to prevent harm.

The following WARNINGS are directed to those persons participating in horse activities, including but not limited to horseback riding.

With respect to horseback riding, Camp Hebron is a sponsor of domesticated animal activity under Pennsylvania Law and is providing you with the following specific WARNINGS:

WARNING: You assume the risk of equine activities pursuant to Pennsylvania Law.

FURTHER WARNING AND DISCLAIMER:

1. A number of inherent risks are associated with a domesticated animal activity. A domesticated animal may behave in a manner that results in damages to property or an injury or death to a person. Risks associated with the activity may include injuries caused by bucking, biting, stumbling, rearing, trampling, scratching, pecking, falling, or butting.
2. The domesticated animal may react unpredictably to conditions including, but not limited to, a sudden movement, loud noise, an unfamiliar environment, or the introduction of unfamiliar persons, animals, or objects.
3. The domesticated animal may also react in a dangerous manner when a condition or treatment is considered hazardous to the welfare of the animal: a collision occurs with an object or animal, or a participant fails to exercise reasonable care, take adequate precautions, or use adequate control when engaging in a domesticated animal activity including failing to maintain reasonable control of the animal or failing to act in a manner consistent with the person's ability.

I wish to personally participate or allow my child to participate in horse activities and understand that I assume the inherent risks in participating in horse or domesticated animal activities as set out in the foregoing WARNINGS. Should any claim, action or suit against Camp Hebron, their employees, representatives or volunteers, which is based on the inherent risks of animal (horse) activity set out above, result in any of those entities having to pay or compensate for any injury to me, I will indemnify and hold harmless the foregoing entities, their employees, representatives or volunteers for any such sum or amount so paid.

WEIGHT LIMIT FOR PARTICIPANTS IS 250 lbs.

I HAVE READ ALL OF THE ABOVE. I UNDERSTAND THE ABOVE CONTENT.

I AM AN ADULT AND I WISH TO PARTICIPATE IN HORSE OR DOMESTICATED ANIMAL ACTIVITY. I CONSENT TO THE CONDITIONS AND TERMS CONTAINED HEREIN.

I AM THE PARENT/LEGAL GUARDIAN OF THE ABOVE NAMED PERSON AND I CONSENT TO THE CONDITIONS AND TERMS CONTAINED HEREIN. Birth date of minor

I have read and understand page 2

Signature

Date:

Printed Name:



GUIDELINES FOR HORSEBACK RIDING

Horseback Riding for ages 8+
Hand-led Horse Rides ages 5+

While riding on a horse can be an amazing experience, it does require that each rider recognize the possibility of inherent danger and abide by these guidelines:

- Have some athletic ability, balance & be physically capable.
- Be able to mount & dismount on your own power.
- Be able to follow verbal instructions.
- Be able to withstand the normal bouncing that occurs on a horse.
- Not exceed 250 lbs (*for the safety of the rider & horse*).
- Wear a riding helmet (*provided by Camp Hebron*).
 - There can be nothing hard between the helmet and head (*i.e. beads, clips, bands, etc.*).
- Leave behind all cell phones, cameras, hand bags, back packs & dangling jewelry.
- Read board of guidelines at the stables before approaching the horses.
- BE ON TIME. You must be present for instructions in order to ride.
- **Abide by Clothing Guidelines:**

CLOTHING GUIDELINES:

- *Secure & Covered Shoes*
- *Pants (all the way to the ankle)*
- *T-Shirt or Long Sleeves*

EXAMPLES OF WHAT NOT TO WEAR:

- *Tank-Tops or Spaghetti Straps*
- *Capri's or Shorts*
- *Clips or Beads in the Hair*
- *Any Sandals, Flip Flops, Crocs*