

Dear Parents/Guardians,

I hope this letter finds you well. We are excited to extend an invitation to your child to join us for an unforgettable experience at this year's Youth Camp, taking place from July 15 to 19 in Brownwood.

****Details:****

- ****Dates:**** July 15-19
- ****Location:**** Brownwood
- ****Cost:**** \$200 per student

This camp promises to be a time of growth, fun, and connection for our young participants. It will include a range of activities, team-building exercises, and opportunities to grow closer to our amazing God!

We understand that the cost may be a consideration for some families. However, we want to assure you that we are committed to making this experience accessible to all interested students. Scholarships are available, and we encourage you to reach out if financial assistance is needed.

****Scholarship Information:****

If your student wants to attend, but the cost is a barrier, please don't hesitate to contact me to discuss scholarship opportunities. We firmly believe that every young person should have the chance to benefit from this enriching experience, regardless of financial circumstances.

****Registration:****

To secure your child's spot at the Youth Camp, please complete the registration process by June 1st. Space is limited, so we encourage early registration to ensure your child doesn't miss out on this fantastic opportunity. In this packet, in order to be registered, I need the necessary forms completed (Food allergies, medical release and liability), and a \$50 deposit in order to reserve your students spot!

We are confident that this Youth Camp will be a highlight of your child's summer, filled with lasting memories and valuable experiences. Thank you for considering this opportunity for your student, and we look forward to having them join us for an incredible week in Brownwood.

If you have any questions or concerns, please feel free to reach out!

Sincerely,

Bryson Riley
Family Pastor
Abernathy's FBC

HEART *of* TEXAS BAPTIST CAMP



ACT JUSTLY ♡ LOVE MERCY ♡ WALK HUMBLLY WITH YOUR GOD

CAMPER CHECKLIST

This page is for your information only. Review it and keep for reference. Do not submit this page with your registration. This is not an exhaustive list and may not include specific items required by the program you are attending. Check with your program director about any additional items.

CAMPER CHECKLIST - WHAT TO BRING TO CAMP

- Completed HOTBC 'Health Statement and Release Form'
- All medications in zip-lock bag with extra copy of the 'Health Statement Form'
- Any other registration forms required by program director
- Bible
- Pen, pencil, highlighter, journal and notepad
- Close toed shoes, sandal/flip-flops, & extra pair of shoes to get dirty
- Sleeping bag or twin size bed sheets, pillow & blanket
- Bath towel, washcloths, soap, shampoo
- Towel for swimming
- Modest swimsuit (see dress code in rules section)
- Sunscreen
- Hat or Cap
- Insect repellent
- Flashlight
- Comfortable casual clothes for everyday activity wear (see dress code)
- Grungy clothes for messy outdoor games - may get ruined
- Laundry bag
- Personal hygiene items (toothbrush, toothpaste, deodorant, etc)
- Cash for concession or gift shop purchases (you may also pre-purchase a camp punch card online)
- A fantastic attitude!

Optional Items:

- Please label your belongs
- Water bottle
- Backpack to carry belongings around

What NOT to bring:

- ✗ Food items that will attract ants and other insects in dorms
- ✗ Cell phones, tablets, computers, game systems, music or video players, or any other electronics that may get lost, broken or stolen
- ✗ Collectible items or clothing, keepsakes or valuable jewelry that may get lost, broken or stolen.
- ✗ Skateboards, roller skates, roller blades, long boards or any other recreational devices not approved for use at camp by leadership
- ✗ Any and all prank supplies
- ✗ Illegal drugs, alcohol, tobacco of any kind, fireworks, firearms, knives or weapons of any kind
- ✗ Immodest clothing or clothing with questionable or distasteful sayings, slogans, designs or messages
- ✗ A bad attitude



CAMP RULES

This page is for your information only. Review it and keep for reference. Do not submit this page with your registration. These general rules & guidelines are established to insure all guests a safe and enjoyable experience while at Heart of Texas Baptist Camp. Failure to comply with these rules could result in any campers(s) and/or adult(s) to be sent home at any time during attendance without refund of fees.

GENERAL RULES & GUIDELINES PERTAINING TO CAMP GUESTS

1. For the safety of all camp guests, these rules will be enforced. Christian conduct is expected at all times. Adults are responsible for the dress and conduct of their group and should know the location of their campers at all times.
2. ALL camp guests MUST register their presence on camp property. Unregistered guests will be considered intruders and will not be covered by camp insurance.
3. Campers may only be released to a parent, legal guardian, or an adult approved by the parent or legal guardian. All other adults must be approved through the camp office. Campers will not be released to any other person.
4. The camper to adult supervision ratio is 10/1. Campers must be under adult supervision at all times.
5. Under no circumstance should males be in female rooms/restrooms or females in males rooms/restrooms. All campers must sleep in separate beds. Only married adults staying in motel accommodations may sleep in the same bed.
6. Camp directors will assign lodging accommodations.
7. Guests staying in dorm lodging must furnish own bedding. Linens are only furnished in camp motel accommodations.
8. The camp speed limit is 15 m.p.h. at all times.
9. All camper medications (*Rx or not, for adults and minors*) are to be listed on the 'Medical Dosage and Frequency Chart', located on the 'Health Statement Form,' and submitted in a sealed zip-lock bag at registration to the Camp Health Staff. All medications MUST be in original bottle and/or container and must have the campers name printed or written clearly on the outside. Medications will be administered as per labeled instructions, dosage, and frequency by the Camp Health Staff unless doctors order states otherwise. Students are not to share any medications, including over-the-counter medications.
10. ALL illness and/or injury MUST be reported to the Camp Health Staff.
11. Prank supplies are not allowed inside any facilities. (i.e. shaving cream, body paint, water balloons, water guns/blasters). There are no exceptions.
12. All facilitated activities (i.e. paintball, challenge course) and/or swimming must be scheduled through the Camp Office prior to arrival. No swimming in the pool, lake, or use of other facilitated activities is allowed when a lifeguard or facilitator, employed by the camp, is not on duty. Any violators of this rule will be sent home.
13. Guests may be charged an extra fee to participate in facilitated activities (i.e. paintball).
14. Guests may be required to pass a swim test in order to swim in the deep end of the pool or at the waterfront. All camp guests are required to wear lifejackets (provided by camp) for all waterfront activities, regardless of the person's age or swimming ability.
15. All guests taking part in any camp facilitated activity (swimming, challenge course, paintball, etc.) must complete and submit the 'Health Statement and Release Form' before participation.
16. Illegal drugs, alcohol, any form of tobacco, weapons, or fireworks are not allowed. Campers will not bring knives or firearms. All other firearms must be approved by camp administration prior to arrival and must be stored appropriately and secured under lock when not in use at the firing range.
17. State fishing license rules and regulations apply to fishing in Lake Brownwood.
18. Profanity will not be tolerated.
19. Campers are not allowed to cross any camp fence boundaries or gain entrance through any locked door or gate without Camp Staff authorization and supervision. Any camper taking part in such activity will be considered trespassing.
20. Any outdoor fire must be pre-approved by camp administration and set in designated fire-rings.
21. **Dress Code:** Campers are expected to reflect a Christian example by their dress. Shorts must be longer than the arm and hand when extended down the side of the person. Modest skirts, dresses and jeans are always acceptable. Immodest shorts or tops, spaghetti strap tops, distasteful designs or messages, cheer shorts and other extreme clothes are not acceptable at any time. For swimming, only one-piece swimsuits, or tankinis that cover more than 80% of the stomach, are allowed. Bikinis, french cut or one piece resembling two-piece swim wear will require a dark colored t-shirt to be worn over them. Campers will be asked to change their attire if an adult feels their dress is inappropriate.
22. Refrain from Public Display of Affection (PDA) with others.
23. There is zero tolerance for fighting. Those caught fighting will be sent home immediately.
24. No littering. Place trash in appropriate receptacles. A litter patrol walk-through of camp grounds will be required prior to departure.
25. Facilities will be cleaned before arrival. Facilities must be left in good condition upon departure. All rooms must be checked by camp staff prior to departure. A fee will be charged for any unacceptably dirty or trashed-out facilities.
26. For air-conditioning efficiency, keep doors and windows closed. Only adults may change thermostat settings.
27. No motorized personal recreational vehicles are allowed on campgrounds without prior approval by HOTBC administration. This includes (but is not limited to) ATV's, motorcycles, scooters, boats, jet skis, and golf carts.
28. No camp owned equipment, beds, furniture, tools, or any other items may be moved without permission from camp administration. Replace all furniture and equipment before departure.
29. Students are to respect all adult leaders and follow their instructions. All adults (including HOTBC staff, attending camp staff, counselors and leadership) are in places of authority over all campers. They have been trained how to guide students for each particular event.
30. Campers MUST be in the dorm by designated camp curfew. Curfew is for camper security as well as mental and physical well-being.
31. NO pets are allowed indoors of any camp facilities. No exceptions.
32. All guests are expected to attend all scheduled worship services, meals, conferences, activities, classes and observe rest periods.
33. No graffiti and/or vandalism toward camp property will be tolerated. This includes (but is not limited to) writing, marking, carving, devaluing in any way, and/or destroying bunks, bathroom stalls, walls, windows, furniture, buildings, equipment and/or foliage. In addition, no sticky tape or glue on floors or walls. Each camp will be charged an additional fee for any graffiti, vandalism and/or damage to property.
34. Campers are not allowed to handle fire extinguishers. In case of fire, the building must be evacuated immediately. Only adults or camp staff are to handle fire extinguishers. A fee for unnecessarily discharging fire extinguishers will be charged.
35. HOTBC retains all rights to sale of merchandise and concessions on camp property. All other sales must be cleared with camp administration.
36. Any dangerous, illegal, disrespectful, and destructive activities or attitudes will be grounds for dismissal from camp property at the guests expense with no refund of fees.



CAMPER MEDICATION CHECKLIST

This page is for your information only. Review it and keep for reference. Do not submit this page with your registration.

MEDICATION CHECKLIST FOR CAMP ATTENDANCE

ALL medications at camp must meet these criteria - prescription (Rx) & over-the-counter

- Leave the medication in the original container. The labeled patient's name and dosage instructions should be clearly visible. No medications will be given unless they are in original containers per 'Texas Department of State Health Services' rules.
- The Heart of Texas Camp 'Health Statement & Release Form' must be fully completed for each camper and signed by the parent/legal guardian to be turned in at registration.
- Place an **extra copy** of the fully completed 'Health Statement Form' in a large zip-lock bag, along with the medication (*in its original container*). The outside of the zip-lock bag should be labeled with the patient's name and church group, and brought to registration on the first day of camp. Each camper that brings medication should have their own labeled zip-lock.
- All medications at camp will be given to the Camp Medical Staff, who will secure all medications in the Health Center. Medications will be administered as per Rx label by the Medical Staff. No medications (*including adult sponsors*) can be left in any bunkhouse. The Camp Health Center is stocked with a variety of over-the-counter medications and can be given as per the parent's authorization.

FREQUENTLY ASKED QUESTIONS

⇒ **Can my child keep their epi-pen and inhaler?** Yes

⇒ **What if my child forgets to come take their medication?** Unless the medication is vital, we will not hunt for your child to take the medication. It is up to the camper to come to the Camp Health Center to take their medication. If you are concerned about this, please talk to the adult counselor who will be with your child and ask them to help.

⇒ **If my child is sick, will they be sent home or to the doctor?** Our camp health professional will make a recommendation to the adult counselor and will attempt to call the parent. If the camper has fever, or is contagious, they cannot stay at camp. Please do not send your child to camp if they are sick.

⇒ **What about head lice?** Please do not send your child to camp if they have head lice. They will be sent home if head lice are found. Some church groups will check the campers before they arrive at camp to avoid problems later. If head lice are found at camp, we must immediately isolate the camper and their belongings as it is highly contagious. We will treat the bed and area to keep it from spreading further. This will be done with sensitivity and respect to the campers.

⇒ **Can I send my child's medication in a pill box organizer separated by days?** No. Each medication must be in the original container with the camper's name and dosage instructions.

⇒ **What if I cannot find my child's immunization record?** We need to know if the immunizations are up-to-date. We do not have to have the exact dates if you do not know.

⇒ **My child is a diabetic. Can he/she keep their insulin?** The Health Center has a refrigerator and can keep the insulin for each camper. The camper may monitor and administer their own insulin as they are used to doing. Any kind of emergency insulin may stay with the camper.

Note: Many health problems at camp are caused from too much sun and not enough water. Please make your child aware of the importance of sunscreen and keeping hydrated.

FOOD, ALLERGY, & SPECIAL DIETARY NEEDS

With hundreds of campers each week, we make the menu to please the majority of the campers and cannot be responsible for certifying allergy free foods. However, HOTBC understands about cross contamination and will make every effort to prevent any problems. We will strive to work with child and parents to make their week a great dining experience. Advance notice is requested to enable HOTBC to provide alternative options. The camper will need to be aware of their own food restrictions and share in the responsibility of eating correctly. Here is what we can do for you:

1. We can provide the menu in advance for anyone who has concerns.
2. We can substitute within reason for main entrees for things such as gluten. For example, we can serve grilled chicken instead of chicken strips to those who have gluten restrictions. Everything on the menu **will not** have a substitution. (They will need to know to skip the roll and gravy.) The substitution will not always be the same thing as the rest of the campers are having, but we can always substitute an entrée for either grilled chicken or a hamburger patty. We have some gluten free dessert options that can also be substituted.
3. Our Food Service Director can go over the menu with the camper at the beginning of the week and make notes on what kind of substitutions they will need and when. (Our Food Service Director will try his best, but he is **not** a dietician, so the camper will need to be knowledgeable of their own food restrictions.) If the parent wants to print off the menu and make notes that will be acceptable. The camper's counselor may want to be involved as well if the camper is not sure or not responsible enough to maintain their specific diet needs.
4. Campers and counselors are welcome to read labels of what we serve. We attempt to print sheets with allergy information on most everything and we keep a notebook in the kitchen.
5. We **do not** cook in peanut oil and **do not** add nuts to our food; however, we cannot guarantee that everything is nut free. We have peanut butter in our kitchen that our staff can eat, but we put it up when the campers come in the Dining Hall because of allergies. Be aware that our concession stand **does** sell items with peanuts.
6. If anybody is highly allergic and wants to bring their own food for the week, that is allowed. There are 2 options for doing this: **#1** the camper (with the food allergies) with a parent and/or an adult sponsor will be allowed to use one of our dorm kitchens (as designated by the Heart of Texas Director or Assistant Director) on our campus to store and prepare the special food. **#2** the camper can store the food in our Dining Hall kitchen as long as it is clearly labeled with the camper's name. The camper can make arrangements with our Food Service Director to heat their food during the meal time.

FOOD, ALLERGY, & SPECIAL DIETARY NEED
Please use a separate page for each person.

Name of your Week of Camp: _____

Date: _____

Name of Camper: _____ Age: _____

Church group attending with: _____

Parents' name: _____

Parents phone # _____

Is parent attending with child? _____

If not, list name of adult sponsor: _____

Check or list allergies or special dietary needs:

- Gluten** **Nuts** **Dairy** **Eggs**

Other: _____

How severe is the allergic reaction to these foods? On a scale of 1-5, circle

1	2	3	4	5
Uncomfortable				life threatening

Does the camper carry an epi-pen?

Is the camper aware of his/her allergies?

Is the camper able to monitor his/her own food requirements?

If not, list the adult sponsor who will be responsible for this:

Is the camper bringing some of their own food? If so, please list below:

If you would like, you may submit a photo of your child so that we can recognize them in the line of campers.



HEALTH STATEMENT FORM

INSTRUCTIONS: Complete both pages of this form (*Health Statement & Release of Liability*) and submit at registration. If bringing any medications (*prescription or not*) to a 3 night (*or longer*) stay, make an extra copy of the completed 'Health Statement Form' to place in a large zip-lock along with all medications to turn in at registration. Print legibly in dark ink. These forms are mandatory for attendance/participation.

LEGAL NOTICE: All adults (*18 and older*) attending a youth or children's camp (*duration of 3 or more nights*) must have a **Criminal Background Check** and **Sex Offender Background Check** performed prior to arrival on camp. Results must be presented on arrival. In addition, all adults having any contact with minors at camp must pass an approved **Child Protection Training** program and exam on recognizing and preventing child abuse. Results of this training/testing must be presented upon arrival.

PARTICIPANT GENERAL HEALTH INFORMATION

Participant Name: _____ Birthdate: ____/____/____ Gender: _____
 Church/Group Attending with: _____ Date of Attendance: ____/____/____ to ____/____/____
 Emergency Contact: _____ Relation to Participant: _____
 Emergency Contact Home Phone: _____ Cell Phone: _____ Work Phone: _____
 List any health concern/issue that would be relevant to an attending physician in the case of an emergency: _____

List any chronic or reoccurring illnesses or diseases: _____

List any food, medicine, insect, plant or any other significant allergies: _____

List any pre-existing injuries which occurred BEFORE attending camp: _____

Write a general assessment of the participants health: _____

Please check all current immunizations for the participant. *It is requested that you attach a current shot record.*

Diphtheria/Tetanus/Pertussis Date of last tetanus shot: ____/____/____ Polio Measles/Mumps/Rubella Tuberculosis Other: _____
 I have chosen to not have my child immunized: (*Parent/Guardian Signature*) _____

PARTICIPANT INSURANCE INFORMATION

Insured Member's Name: _____ Member ID: _____
 Health Insurance Provider: _____ Group ID: _____
 Health Insurance Provider Phone Number(s): _____
 Primary Care Physician: _____ Phone: _____

It is requested that you attach a photocopy of your current Health/Accident Insurance Card.

MEDICAL POLICY AND INSTRUCTIONS FOR CAMP ATTENDANCE

- All medications (Rx or over-the-counter) must be labeled with patients name and in original container. Check expiration dates. No expired medications will be given.
- All prescription and non-prescription medications must be presented to the camp health personnel upon arrival to camp.
- All medications must be stored and dispensed from the camp health station (except EpiPens or emergency inhalers). Campers are not allowed to keep or self-administer any medication in accordance with Texas Department of State Health Services regulations.
- Diabetics must bring a copy of their Diabetes Management Plan.
- Non-prescription medications, such as vitamin supplements or pain relievers, will be given only according to the age and dosage restrictions and instructions listed on the package unless a doctor's order is provided.
- EpiPens or emergency inhalers may be kept with the camper (please send an extra one to to be kept in the health station). Camp health personnel must be notified immediately when a camper uses an EpiPen. If asthma symptoms are not completely relieved the camper must be brought to the health center for evaluation.
- List any medical problem, medical alert, allergy, or other relevant health concern/issue under 'Participant General Health Information.'

MEDICATION DOSAGE AND FREQUENCY CHART

INSTRUCTIONS: List all medications, dosage and frequency on the chart below. Print an extra copy of this chart to add additional medications. Place all medications *and an extra copy of this page* in a large zip-lock with the participants name and church/group written in permanent marker on the outside of the bag.

Name of Medication	Dosage	Frequency / Time(s)	Comments
1)			
2)			
3)			
4)			

By signing below, I acknowledge that the information listed on this form is correct and current and that the above named participant is physically capable to be present on camp and participate in any and all camp activities.

Participant Signature _____

Parent/Legal Guardian Signature (*if participant is under 18*) _____

Date: ____/____/____



RELEASE OF LIABILITY FORM

INSTRUCTIONS: Complete both pages of this form (*Health Statement & Release of Liability*) and submit at registration. If bringing any medications (*prescription or not*) to a 3 night (*or longer*) stay, make an extra copy of the completed 'Health Statement Form' to place in a large zip-lock along with all medications to turn in at registration. Print legibly in dark ink. These forms are mandatory for attendance/participation.

LEGAL NOTICE: All adults (*18 and older*) attending a youth or children's camp (*duration of 3 or more nights*) must have a **Criminal Background Check and Sex Offender Background Check** performed prior to arrival on camp. Results must be presented on arrival. In addition, all adults having any contact with minors at camp must pass an approved **Child Protection Training** program and exam on recognizing and preventing child abuse. Results of this training/testing must be presented upon arrival.

PARTICIPANT INFORMATION

Participant Name: _____ Birthdate: ____/____/____ Gender: _____
 Home Address: _____ City: _____ State: _____ Zip: _____
 Home Phone: _____ Cell Phone: _____ Grade Completed: _____ T-Shirt Size: _____
 E-mail: _____ Check if you do NOT want to receive camp e-mails
 Church/Group Attending with: _____ Date of Attendance: ____/____/____ to ____/____/____
 Emergency Contact: _____ Phone: _____ Relation to Participant: _____

PARENT/LEGAL GUARDIAN INFORMATION

Complete only if participant is under 18 years of age

Parent/Legal Guardian Name: _____ Relation to Participant: _____
 Home Address: _____ City: _____ State: _____ Zip: _____
 Home Phone: _____ Cell Phone: _____ Work Phone: _____
 E-mail: _____ Check if you do NOT want to receive camp e-mails

STATEMENT OF PARTICIPATION, ASSUMPTION OF RISK, AND RELEASE OF LIABILITY

1. ACKNOWLEDGMENT OF INHERENT RISKS: I certify that I am aware of the inherent risks associated with the various indoor and outdoor camp activities, as well as the inherent risks of being on camp property. Heart of Texas Baptist Camp takes all reasonable precautions to ensure a safe and enjoyable experience. However, parts of the experience, by their nature, can be physically demanding and include varying levels of stress and anxiety, not all of which can be foreseen. I acknowledge the decision to participate in any camp activity at any level is at all times completely up to the individuals choice. As the parent/legal guardian, I give the participant named above permission to participate in any and all camp activities. Further, in consideration for Heart of Texas Baptist Camp agreeing to accept the person named above as a participant in camp activities, I hereby personally assume all the risks in connection with my, or my child's, participation in any and all events at Heart of Texas Baptist Camp.

2. ACKNOWLEDGMENT OF FINANCIAL RESPONSIBILITY & LIMITATIONS OF INSURANCE COVERAGE: In the event that the participant named above is injured during camp activities or treated for illness contracted on camp property, I acknowledge that the participants family/personal health and accident insurance will act as primary provider. The camps medical insurance policy will only act as a secondary provider for injuries or illnesses that occur on camp premises. I understand that, beyond these limitations, the costs and associated expenses incurred in connection with medical services rendered in response to said injury or illness are my responsibility to cover.

3. RELEASE AND HOLD HARMLESS AGREEMENT: I agree to release and hold harmless the Heart of Texas Baptist Camp, it's trustees, employees, agents and representatives for any injury, harm, or other damage by any occurrence in connection with participation in camp activities in any form or fashion. I further agree to release and hold harmless the Heart of Texas Baptist Camp, it's trustees, employees, agents and representatives from any claim by me, my family, estate, heirs or assigns out of my, or my child's, participation in activities at Heart of Texas Baptist Camp.

4. PRE-AUTHORIZATION FOR MEDICAL TREATMENT: I hereby authorize any medical and/or surgical treatment (including but not limited to hospital care)

to be rendered to the participant named above, as needed in the judgement of the treating physician (who is chosen by the Heart of Texas Baptist Camp Director) or any employee working under him/her, as circumstances require. I further authorize the Heart of Texas Baptist Camp nurse, health staff, camp management, camp staff, activity facilitators, volunteers and/or event leaders to render emergency rescues, CPR, and/or first aid emergency care as deemed necessary within the scope of their training. I further authorize the designated camp nurse, or qualified health supervisor, to administer medications as prescribed and programmed on the 'Medication Dosage & Frequency Chart,' completed by the parent or guardian on the 'Health Statement Form.'

5. NON-PRESCRIPTION MEDICATIONS: I give permission to the camp nurse, health supervisor, and/or health center staff to administer non-prescription, over-the-counter medications to the participant named above based on symptoms (not a diagnosis). For example (but not limited to); Tylenol or ibuprofen for mild fever or pain; Benadryl or Claritin for allergy symptoms; Pepto-Bismol for diarrhea; cortisone cream for bug bites; calamine for poison ivy; and so on

6. ACKNOWLEDGEMENT OF RESPONSIBILITY FOR DAMAGES: I agree that I am financially responsible for any damage to camp property caused by the participant named above; including any acts of graffiti, vandalism or destruction of property.

7. CONSENT TO ADDRESS DISCIPLINARY PROBLEMS: The above named participant agrees to obey and observe all camp rules, dress codes, procedures, schedules, and curfews. As well as fully cooperate with adult leadership, camp staff, camp facilitators and other campers. I agree that, if in the judgement of the adult leadership and/or camp staff, the above named participant becomes a discipline problem, that participant may be sent home at my expense and that I will forfeit all camp fees paid.

8. USE OF PARTICIPANT PHOTOGRAPH/VIDEO FOR PROMOTIONAL PURPOSES: I agree and consent that the above named participant photographs, and/or videos, may be used for promotional purposes for publicity material by Heart of Texas Baptist Camp and/or program leadership.

By signing below, I acknowledge that I have read, understand and will adhere to the information set forth above, including the Release and Hold Harmless Agreement.

Participant Signature _____

Parent/Legal Guardian Signature (*if participant is under 18*) _____

Date: ____/____/____