

GENEVA HILLS GROUP, Inc
SUMMER CAMP
RELEASE, INDEMNIFICATION, AND MEDICAL AUTHORIZATION AGREEMENT
FOR PARTICIPATING MINORS

Name of Minor Participant _____

Date of Birth ____/____/____ Male Female Grade (Upcoming School Year) _____

Dates Attending Camp _____

School _____ Religious Affiliation/Denomination _____

Name of Parent/Legal Guardian _____

Address _____ City _____

State _____ Zip Code _____ Phone(s) _____

E-Mail _____

As a parent or legal guardian of the above-named participant, I hereby give my permission for my child to participate in Geneva Hills Summer Camp and hereby personally assume all risks in connection with my child's participation in summer camp activities associated with Geneva Hills Summer Camp.

I certify that I am cognizant of the inherent dangers associated with participation in summer camp activities which may include but are not limited to: canoeing, kayaking, swimming, archery, hiking, ropes course, grounds initiatives, field games, campfires. Additionally, I acknowledge the fact that certain activities may be subcontracted to vendors located away from and off of Geneva Hills property that may require transportation of my child to such activity locations.

I hereby authorize Geneva Hills to render or obtain such emergency medical care or treatment as may be necessary should any injury, harm, or accident occur to my child during their participation in summer camp activities. I further authorize Geneva Hills to administer medications to my child as indicated on the provided Medical Information Form.

I hereby release from all liability, and indemnify and hold harmless Geneva Hills, Geneva Hills Group, Inc. and any employee, agent or representative thereof from any and all liability, actions, causes of actions, claims, judgments, costs or expenses, arising out of or in any way related to injury, illness or loss incurred by the participant while participating in or traveling to or from Geneva Hills Summer Camp 2016.

I further state that I am of lawful age and legally competent to sign this indemnification and release; that I understand the terms herein are contractual and not a mere recital; and that I have signed this document of my own free act and coalition. I further state and acknowledge that I have fully informed myself of the contents of this indemnification and release by reading it before I have signed it.

Parent/Legal Guardian Signature _____ Date _____

**GENEVA HILLS SUMMER CAMP
MEDICAL INFORMATION FORM**

Dates of Camp Week Attending:

Camper Full Name:

First

Middle

Last

DOB: ____/____/____ Age: ____ Gender (circle): Male / Female

Height: ____' ____" Weight: ____ Date of last Tetanus Shot

Booster: _____

Name of Parent or Legal Guardian:

Parent / Guardian

Phone(s): _____

Medical Insurance Information (as it appears on medical insurance card):

Name of Insurance Provider: _____

Policy or Member #: _____ Group # _____

Insurance Provider Phone: _____

Name of Primary Insured: _____

Primary Physician Information:

Name of Primary Physician: _____

Primary Physician Phone: _____

Camper Medical Information (cicle):

Are you diabetic? Yes / No

Do you have asthma? Yes / No

Do you have any known allergies to any medications? Yes / No

If yes, please list:

Do you have any food allergies? Yes / No

If yes, please list:

Do you have any other know allergies? Yes / No

If yes, please list:

Do you have any physical limitations or disabilities? Yes / No

If yes, please explain:

Other Medical Information:

Swimming Ability (Circle):

Please rate your swimming ability: Excellent / Good / Fair / Poor

Medications:

Are you currently taking any type of medication? Yes / No

If yes, please complete the following:

Medication Name	Prescription or Over-Counter?	Prescription #	Dosage	Parent/Guardian Signature	For nurses use only

Other Medical Information:

Permission to Administer Non-Prescription Medications:

I, the parent/legal guardian of the above named camper, hereby give my permission for a licensed nurse/camp representative to dispense to my minor child the following medications should my child request such and should the nurse deem appropriate:

(Please sign on line next to named drug to give permission to dispense.)

- Tylenol (Acetaminophen):
- Advil / Motrin (Ibuprofen):
- Antihistamine (i.e. Benadryl, Claritin):
- Pepto-Bismol:
- Antacids (i.e. Maalox, Tums):
- Decongestant (i.e. Sudafed):
- Laxative (i.e. Milk of Magnesia):
- Diarrhea Medication (i.e. Imodium):

Important Note Regarding Medications:

- *With the exception of asthma inhalers and EpiPens, no minor (under age 18) may possess any drugs (prescription or non-prescription) on their person or in their baggage at any time. Upon arrival to camp, all medications must be given to the camp nurse who will hold and disburse medications according to prescription directives.*
- **All medication must be in its original container with the attached prescription directives.** Medications not in an original container cannot be accepted.

- *It is requested that all medications belonging to one person be placed into a single zip-lock bag and clearly labeled with the person's name.*

Nurses Notes:

**PARENT/LEGAL GUARDIAN CONSENT FOR RELEASE OF
PERSONALLY IDENTIFIABLE INFORMATION**

The undersigned parent/legal guardian of _____
(Camper, Counselor, Staff Name)

a camper and/or staff and/or counselor with Geneva Hills Summer Camp, hereby consents to the release of the following personally identifiable information: photos, name, church, school, grade, city, state, age, personal quotes(i.e. testimonials, comments of support, etc.), Parent(s)/Legal Guardian(s) Name(s). for the release in promotions, fundraising, and camp promotions. These items could be used in brochures, fliers, videos, letters, Geneva Hills Web Site, bulletins, newsletters, radio, television, Facebook.

The undersigned consent to the transfer of the above information to a third or subsequent party.

(Parent/Legal Guardian Printed Name)

(Parent/Legal Guardian Authorized Signature)

(Date)

GENEVA HILLS SUMMER CAMP CODE OF CONDUCT

Positive, appropriate behavior is expected of all campers, staff, and counselors. Therefore, as a condition of participation in Geneva Hills Summer Camp, it is expected that all persons conduct themselves according to the following standards of behavior:

- The use or possession of alcohol, illegal drugs, tobacco in any form, fireworks, firearms, knives or any other kind of weapon is strictly prohibited.
- All participants must remain on Geneva Hills property (or designated off-site activity property) throughout their stay unless they have permission from the Camp Director or her designated representative and are accompanied by an adult staff member.
- Inappropriate sexual behavior and/or sexual harassment is prohibited. Boys shall remain only in boys dorms and restrooms and Girls shall remain only in girls dorms and restrooms.
- Participants will have respect for all personal property. Damage to or defacing of property will be the financial responsibility of the participants involved and the participant's parents/legal guardians.
- Participants shall show respect to others and their property. Use language and manners that are respectful.

I further understand that Geneva Hills Summer Camp through its Director or a person designated by its Director, reserves the right to terminate camper participation should violation of above-state policies and codes of conduct occur.

**I HAVE READ AND UNDERSTAND THE STANDARDS OF BEHAVIOR
CONTAINED IN THIS CODE OF CONDUCT**

Camper Signature _____

Date _____

Parent/Legal Guardian Signature _____

Date _____

DAY/OVERNIGHT CAMP DETAILS

- **CONCERNING YOUR CHILD'S SAFETY:**

Please know that all aspects of your child's safety are our number one concern. Accordingly, our program staff are trained and certified in each of their respective areas of responsibility as well as in first aid. In addition, our mission and principles are based in Christian ideals which, of course, are the foundation of what Geneva Hills is all about. Next, we will have a certified nurse as part of the summer camp staff who will attend to all first aid issues, make all medical decisions, and will facilitate the dispensing of all medications throughout camp – you will meet the nurse upon arrival to camp. Finally, Geneva Hills counselors, programming staff, and administrators – those ages 18 and over – have submitted to an Ohio Bureau of Criminal Investigation and Identification (BCI&I) background check as a condition of their being a member of the camp team. (By law, minors under the age of 18 cannot be submitted to BCI checks.)

- **CAMP STORE / SPENDING MONEY:**

We will be operating a Camp Store. The store will be open once in the afternoon each day for campers to purchase snacks. The store carries candy bars, chips, soda, fresh fruit, granola bars, and other camp trinkets. You can decide as a family how much money you want to send with your child for this purpose. \$15 for the week (\$3/day). It is requested that cash be sent in quarters or \$1 bills as the camp store carries limited change. As part of your camp registration fee, your child will be receiving a snack each night.

As part of your camp registration fee, your child will be receiving a commemorative camp T-shirt.

- **POLICY REGARDING CELL PHONES AND OTHER ELECTRONIC DEVICES:**

Electronic devices of any type are strictly forbidden. Please leave these at home. Also, campers will not be permitted to have cell phones. Anyone choosing to bring these items to camp will have them confiscated and returned before leaving camp on the last day.

- **EMERGENCY CONTACT INFORMATION:**

We respectfully request that you refrain from contacting your child while they are at camp. If your child needs to reach you – for whatever reason – be assured that they will be given access to a phone to call you. In the event that you do need to reach us, please use the following numbers:

Geneva Hills Main Office Line: 740-746-8439
Jessica Raybourne (Camp Director) Cell: 740-503-8543

- **REGISTRATION FORM PACKET (all forms in this packet to be completed)**

GENEVA HILLS SUMMER CAMP
OVERNIGHT CAMPER PACKING LIST
PLEASE BE SURE ALL ARTICLES ARE MARKED WITH YOUR NAME

- Sleeping Bag and/or Bed Linens and Blankets. Lightweight bed sheets are a good idea because of the summer heat. (Label with name.)
 - A twin sized bed with mattress (bunks) will be provided.
 - Please be sure to bring your sleeping bag and bed linens in some type of other bag to keep them clean and neat.

- Bed Pillow (Label with name.)

- An inexpensive, twin-size, plastic mattress cover to put over the provided mattress on your bed/bunk. (optional)

- Casual, comfortable, clothes (shorts, T-Shirts, tank tops, etc.)
 - Clothing with inappropriate messages and innuendo are not permitted.
 - Be sure you have at least one pair of jeans.
 - No midriff tops or low-rise shorts/jeans. (Your belly should be covered.)
 - 2 pair of tennis shoes and/or sandals...that will get dirty and wet!
 - 1 sweatshirt...just in case it gets cool.
 - 1 lightweight rain jacket or poncho...because we play even in the rain!!
 - NOTE: Flip-Flops are recommended for showers

- Appropriate Sleepwear

- Swimwear

- 2 Beach Towels (Label with name.)

- A couple of large trash bags to put your dirty clothes in and to take your sleeping bag and bed linens home in.

- flashlight

- Personal Hygiene Items: soap, toothpaste, toothbrush, shampoo, deodorant, etc.

- Sun block and something for sunburn. (As you will be in the sun most of the day, be sure to bring whatever items you need to protect your skin or to soothe it in the event you get too much sun.)

- Bath Towels and Washcloth (bring a couple)

- Insect Repellant (Skin-so-Soft, Skintastic, etc.) Also, a small tube of anti-itch cream or topical Benadryl for mosquito bites.

- A Backpack to carry your stuff throughout the day is essential. (Label with name.)

- An insulated Water Bottle to carry along with you to daily activities is a must. (Label with name.)

- A Small Notebook / Journal and pen/pencil (Label with your name on cover)

- Medications: **Important Note Regarding Medications:**

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-All medications **must be in its original container with the attached prescription directives.** Medications not in an original container cannot be accepted.

-It is requested that all **medications belonging to one camper be placed into one zip-lock bag and clearly labeled with the camper's name** using a label or permanent marker.

- Spending Money for snacks at Camp Store (around \$15...in quarters and \$1 bills)