## Waiver of Liability, Medical Release & Code of Conduct

Event: Confirmation Camp I Date: February 8-10, 2019

Location: Camp Tanako, 501-262-2600, tanako@tanako.org

Participant Name:	Date of Birth:
in the above listed event. In consideration for my child Arkansas Conference of the United Methodist Church and	above. I hereby give my permission and full consent for my child or youth to participate or youth's participation in the event, I hereby release, acquit and hold harmless the lor Camp Tanako, Inc and all of their staff, agents, servants, employees and volunteers kind, seen or unforeseen, which may at any time result to me, my child or youth, or my youth's participation in this event.
Signature of Parent/ Guardian:	Date:
Medical Information and Release	
Name of Physician	Phone Number of Physician
Date of last tetanus shot	_
List any Allergies/Dietary Resrtictions	
List of medications (Prescriptions and/or OTC)	
Relevant Medical History/Medical Treatment (diabetes, ep	bilepsy, heart murmur, etc)
Please list any camp activities from which the camper sho	ould be exempt for health reasons
Please list any current physical, mental, or psychological of while at camp	conditions requiring medication, treatment, or special restrictions or considerations
Child's Health Insurer:	Address
Group Number	Policy Number
medical care arise, for medical treatment or hospital service	ed above. I hereby give my permission and full consent, should the necessity of ces as ordered or recommended by a qualified physician or other medical care either directly or through my own personal health and accident insurance policy all
Signature of Parent/Guardian:	Date:

## **Media Consent and Code of Conduct**

I consent to the collection and use of my personal images by photography or video recording at this ARUMC and/or Camp Tanako, Inc. event. I acknowledge these images may be used on the ARUMC and/or Camp Tanako, Inc. website, newsletters, publications and social media accounts. I understand that no personal information, such as names, will be used in any publications unless express consent is given. As a representatives of Christ and of The United Methodist Church, we, the participants of ARUMC and/or Camp Tanako, Inc. events, take seriously our responsibility to care for one another. This code represents affirmation of our concern for the well-being of the total community. We covenant with each other to insure the safety of all, to make our time together most meaningful, and to care for the facility which we share.

- 1) Anything considered illegal under civil and criminal law in Arkansas is illegal for participants of any ARUMC and/or Camp Tanako, Inc. event. This includes drug possession and use, alcohol consumption and possession by a minor and alcohol consumption on state property, possession of firearms, weapons or fireworks, etc. Tobacco use is disallowed as well.
- 2) Dress should be appropriate for a co-ed Christian environment.
- 3) All participants are expected to participate in the event in full and be at designated places at all times.
- 4) Visitation between males and females will be in designated areas ONLY.
- 5) We will respect the person, equipment and property of others as well as the public and private properties (living areas, meeting rooms, etc) in use during the event.
- 6) Any accidental damage to the church/camp property will be billed to the local church and will be the responsibility of the persons who caused the damage. Intentional damage is subject to additional penalties.
- 7) Cell phones, Radios, CD players, Mp3 players, etc. may be used during free time at levels that do not disturb others and cannot be heard outside the room in which it is being played. I understand that violations of this covenant and/or other inappropriate behavior could require disciplinary action for youth and adults. Decisions about appropriate disciplinary action will be made by adult group leaders. The ARUMC and/or Camp Tanako, Inc. reserves the right to call parents or to dismiss any person who breaks this code of conduct and send them home at their own expense. I understand that neither the Arkansas United Methodist Church and/or Camp Tanako, Inc. will be held responsible for any costs incurred due to medical treatment that is necessary nor from any damages to any property while at the event.
- 8) No food and/or drinks allowed in cabins and outside of designated areas.
- 9) All accidents, injuries, and illnesses must be reported to the camp administration immediately.

Participant Signature			
Parent/Guardian Signature		_ Date	
Authorized Release			
I hereby authorize my child,	to be released to	, the	
adult leader with	(Church Name).		
Parent/Guardian Signature		_ Date	
Adult Leaders Attending Only			
Ī,	, understand that my participation as ar	a adult leader/mentor with the confirmands from	
(Name)			
	includes supervision responsibilities	for the children/youth in my group. I	
(Church Name)			
understand that supervision means knowing the location of these children/youth at all times and remaining in close enough proximity to said			
children/youth to respond in a timely manner should there be an emergency or accident.			
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