

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

**Event:** Fall 2019 Confirmation Camp

**Date:** October 18-20, 2019

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

Participant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

### Waiver of Liability

I am the legal parent or guardian of the child or youth listed above. I hereby give my permission and full consent for my child or youth to participate in the above listed event. In consideration for my child or youth's participation in the event, I hereby release, acquit and hold harmless the Arkansas Conference of the United Methodist Church and/or Camp Tanako, Inc and all of their staff, agents, servants, employees and volunteers from any and all liability for any damages of whatsoever kind, seen or unforeseen, which may at any time result to me, my child or youth, or my family on account of or in any way related to my child's or 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, epilepsy, heart murmur, etc) \_\_\_\_\_

\_\_\_\_\_

Please list any camp activities from which the camper should be exempt for health reasons \_\_\_\_\_

\_\_\_\_\_

Please list any current physical, mental, or psychological conditions requiring medication, treatment, or special restrictions or considerations while at camp \_\_\_\_\_

\_\_\_\_\_

Child's Health Insurer: \_\_\_\_\_ Address \_\_\_\_\_

Group Number \_\_\_\_\_ Policy Number \_\_\_\_\_

I am the legal parent or guardian of the child or youth listed above. I hereby give my permission and full consent, should the necessity of medical care arise, for medical treatment or hospital services as ordered or recommended by a qualified physician or other medical care provider. Should medical help be needed, I agree to pay either directly or through my own personal health and accident insurance policy all related medical or hospital costs.

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** \_\_\_\_\_ **Date** \_\_\_\_\_

**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**

I, \_\_\_\_\_, understand that my participation as an 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.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_