

Agreement Statements 2012

updated February 23, 2012

Please read over the following sections carefully. After you have read all parts of this agreement, please download an Agreement form. For a camper's registration to be accepted this form will need to be signed by the participant if 18 years of age or the legal guardian of the participant if the participant is a minor. Payment must be included if not paying by credit card. Return Form and check (if applicable) to: Camp Cross Registrar 245 E. 13th Ave Spokane, WA 99202

COVENANT AGREEMENT: All participants (adults and youth) agree to abide by the standards of Camp Cross, Youth Ministries and the Episcopal Diocese of Spokane for community living defined as follows: Be on time and ready to actively participate in all scheduled activities. Respect others and yourself through appropriate actions and language (treat others with respect and dignity). Be respectful of other's belongings and personal space. Wear appropriate clothing for all scheduled activities. No illegal use of drugs (prescription or non-prescription), tobacco products, alcohol or fireworks. No weapons of any sort are allowed. Do not engage in inappropriate sexual behavior. Always check in, and take a buddy when applicable. Cell phones, iPods and any other personal electronic devices are not permitted at any activity. Be encouraging and take opportunities to lift each other up.

MEDIA RELEASE: By signing the agreement form, I give my permission for photographs and/or video footage of myself and/or my child to be used by the Episcopal Diocese of Spokane for promotional purposes (brochures, diocesan websites, videos, presentations, etc.). I acknowledge that although the Episcopal Diocese of Spokane doesn't authorize subsequent use of the pictures by others, it can't guarantee that further dissemination will not occur.

RELEASE of LIABILITY- Please Read Carefully: Although precautions are taken to provide proper organization, instruction, and equipment for your and/ or your child's participation in our programs, there can be no guarantee of absolute safety against injury and unforeseeable accident. There are elements of risk in any adventure, sport, or program involving physical exertion and risk taking, or associated with the outdoors (referred to herein as "activity"), and the use of any equipment for the activity. I, on behalf of myself, my child, and any other parent of the child, understand that my child may be involved in activities including but not limited to sailing, water-skiing, tubing, canoeing, kayaking, swimming, team building initiatives, boating, low ropes course, hiking, orienteering, camp-outs and/or other physical activities. Some of these activities are rugged adventure recreational activities. I acknowledge that I or my child may decline to participate in any activity. Any participation will be voluntary.

ACKNOWLEDGMENT OF RISKS: I recognize that there is inherent danger in any activity which involves physical exertion or risk taking; that natural hazards do exist; that although the program may not be strenuous, injuries or medical complications may occur; that certain foreseeable and unforeseeable events unique to each individual activity can contribute to the unpredictability of the activity; that balance and physical coordination may affect the occurrence of accidents or falls; and that I should ask about other potential hazards and recommended precautions and procedures.

EXPRESS ASSUMPTION OF RISK AND RESPONSIBILITY: In recognition of the inherent risks of the activity which the participant (myself and/or my child) will be engaged in, I confirm that the participant (myself and/or my child) is physically and mentally capable of participation in the activity and/or using equipment. I understand that I and/or my child will be participating willingly and voluntarily and I assume full responsibility for personal injuries, accidents or illnesses, including death. I also assume responsibility for damage to or loss of personal property as the result of any accident that may occur. On behalf of myself, my child, and any other parent or guardian of the child, I assume the risk(s) of personal injuries, accidents, and/or illnesses, including, but not limited to, sprains, torn muscles and/or ligaments; fractured or broken bones; eye damage; cuts, wounds, scrapes, abrasions, and/or contusions; dehydration, head, neck, and/or spinal injuries; animal or insect bite or attack; shock, paralysis, and/or death.

TERMINATION OF ACTIVITY: I recognize that you, as provider of services, may find it necessary to terminate any activity due to forces of nature, medical necessities, or other problems; and/or to terminate the participation of any person you judge to be incapable of meeting the rigors or requirements of participating in the activity. I accept your right to take such actions for the safety of myself and/or my child and/or other participants. I acknowledge that no guarantees have been made with respect to achieving objectives.

AUTHORIZATION: I hereby authorize the release of any records necessary for medical treatment, referral, billing, or insurance purposes. I also authorize any medical treatment deemed necessary in the event of any injury to myself and/or my child while participating in the activity. I will have appropriate insurance or, in its absence, I agree to pay all costs of rescue and/or medical services as may be incurred on behalf of myself and/or my child.

RELEASE: In consideration of services or property provided, I, for myself, for my child, and for any other parent or guardian of the child, do hereby release the Episcopal Diocese of Spokane, Camp Cross and Camp Cross Staff Members from all liability with respect to myself and/or my child and I waive any claim for damage arising from any cause whatsoever, except for any claims which are the result of gross negligence of the party or parties released herein. I authorize the Episcopal Diocese of Spokane, Camp Cross and Camp Cross Staff Members to take and use any photographs, slides and videos of my camper for promotional purposes, brochures, flyers, website and the internet.

TRANSPORTATION PERMISSION: I give permission for myself and/or my child to ride any mode of transportation as deemed necessary for program or emergency situations under the supervision of Diocesan/ Camp Cross Staff and adult chaperones. These may include, but are not limited to, the Diocesan van, Pontoon boat and chartered bus from an approved vendor. I hereby release the Episcopal Diocese of Spokane, Staff and adult chaperones from responsibility and liability for any injury or illness that myself and/or my child may sustain during the trip. In the event of an emergency, I hereby authorize the designated chaperones to authorize treatment as deemed necessary. NOTE: Youth Camp Check-ins take place at St. Luke's in Coeur d'Alene. All campers will ride the bus from St. Luke's to Camp on the first day of each session. Campers may be picked up at Loff's Bay on the last day of the session (Please refer to Camp's Website at for pick up times at Camp Cross). Please denote where your camper will be picked up and dropped off on the online registration.

MEDICAL AUTHORIZATION: The participant's health history is correct so far as I know, and the person herein described has permission to engage in all prescribed activities, except as noted by me. I give permission for the nurse to administer Tylenol, Ibuprofen or Benadryl as well as routine medical care as he/she sees fit. In the event I cannot be reached in an EMERGENCY, I hereby give permission to the physician selected by the director to hospitalize, secure proper treatment for, and to order injection anesthesia or surgery for the participant. Your emergency contact person will be notified in the event of any medical care given that is not noted on this form. I understand that Accident and illness coverage is the responsibility of the participant or the participant's parent/guardian. I also understand that it is the responsibility of the registered participant and/or their parent/ legal guardian to provide Camp Cross with up-to-date information and alert Camp Cross to any changes in medical history or medication.

An up-to-date online registration and a copy of the Agreement Form must be submitted for EACH session a participant attends.

It is the responsibility of the registered participant and/or their parent/ legal guardian to provide Camp Cross with any changes in medical history or medication.