

## 2020 SOUTH PACIFIC AND AUSTRALIA TEEN CAMP WAIVER FORM

I, \_\_\_\_\_ as parent/guardian of \_\_\_\_\_ the camper, give permission for the camper to attend and to participate in all activities of the 2020 South Pacific and Australia Teen Camp location at Wesley Vision Valley Camp, Arcadia NSW and hosted by the Sydney Church of Christ. Teen Camp activities may include but are not limited to swimming, athletics, and transportation by personal vehicle or private bus to and from the campgrounds.

As evidence by my signature below, I hereby waive all claims that I or my heirs or assigns might have against the Sydney Church of Christ or any of their subsidiaries, or any other sponsoring churches, their directors, officers, church and Teen Ministry leaders, members or other persons who lead or direct the 2020 South Pacific and Australia Teen Camp activities. Furthermore, I hereby release from liability the persons and entities mentioned above for any and all injuries or illnesses that are incurred by the camper arising from or in connection with the camper's participation in 2020 South Pacific and Australia Teen Camp activities. I understand that the teen camper's participation in camp activities may involve inherent dangers that could result in injury, illness, or even loss of life to the camper and have considered such risks prior to executing this waiver and release.

I understand that the Teen Camp Director reserves the right to dismiss any teen camper whose behaviour/attitude is detrimental to the welfare of the teen camp or whose conduct is not in accordance with the standards of the 2020 South Pacific and Australia Teen Camp. I understand that in the event of dismissal or withdrawal because of homesickness, misconduct, or any other causes that no refund will be given.

As evidenced by my signature below, I acknowledge that I have read, understand, and agree to the terms of the waiver and release and the other conditions of the 2020 South Pacific and Australia Teen Camp participation that are described herein. I have been advised of the potential dangers of the teen camper participating and engaging in 2020 South Pacific and Australia Teen Camp activities and am aware of the legal consequences of signing the waiver and release.

Should it be necessary for the above mentioned camper to receive emergency medical attention or treatment while participating in 2020 South Pacific and Australia Teen Camp activities, I hereby give permission for the person(s) leading and directing the camp activities (the "Teen Camp Directors") to administer emergency medical treatment (i.e. first aid, etc.) to the camper or secure the services of an ambulance, hospital, physician, or other medical professional to treat the teen camper as the Teen Camp Directors deem appropriate and necessary. I also acknowledge that the 2020 South Pacific and Australia Teen Camp Directors are not responsible for the self-administration of medication or medical treatment by the teen camper. I understand that the 2020 South Pacific and Australia Teen Camp, Sydney Church of Christ, and Teen Camp Directors have no health insurance to cover medical or hospital costs incurred by the camper; therefore, financial responsibility for any medical or hospital costs shall be the sole responsibility of the parent/legal guardian.

### PROVIDE THE APPROPRIATE SIGNATURES BELOW:

Parent/Guardian's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Church Leader's signature: \_\_\_\_\_ Date: \_\_\_\_\_