

Medical Treatment Authorization for a Minor

I, _____, parent/guardian of _____ (the “Minor Child”), hereby grant Minnesota Citizens Concerned for Life - Life Leadership Camp Staff the authority to obtain medical treatment for my minor child as may be appropriate in case of emergency.

This grant of temporary authority shall begin on ___/___/ 20___, and end on ___/___/ 20___, the duration of Life Leadership Camp.

Minor Child’s name: _____

Parent’s / Guardian’s name: _____

Parent’s / Guardian’s Signature: _____

Date: ___/___/_____

Release of Liability

While I understand that Life Leadership Camp staff will take reasonable steps to provide individual care and safety for my child, I am aware that the above-mentioned organization and their staff cannot assume any responsibility for any injury, damage, or harm which might result during the course of participation in any activity connected to MCCL - Life Leadership Camp. In consideration of permitting my minor child to participate, I agree that such responsibility will remain with me, as the parent or guardian of my child. Should any claim be asserted by any person, as a result of the acts of my minor child while participating in the activity described above, or traveling to, from or part of such activity, or should my minor child assert any claim against the sponsors, I agree to indemnify and hold the organization and its staff harmless from any such claim including attorney fees and costs incurred in defense thereof.

Parent’s / Guardian’s Signature: _____

Date: ___/___/_____

Emergency Contact Information

In case of emergency, the above care providers will try to contact the minor’s emergency contacts in the order listed below.

Emergency Contact #1

Name: _____

Relationship to minor child: _____

Phone number: _____

Emergency Contact #2

Name: _____

Relationship to minor child: _____

Phone number: _____

Emergency Contact #3

Name: _____

Relationship to minor child: _____

Phone number: _____

Insurance Information:

Insurance company: _____ Policy #: _____

Policy holder’s name: _____

Minor Child’s Medical Information:

Date of birth: ____/____/____

Date of last tetanus booster: ____/____/____ or (circle) : N/A

Current Medications that Camp Staff and medical personnel should be aware of in case of an emergency:

Prescription: _____

Non-prescription: _____

Please list any allergies and their prescribed medications:

My child is bringing medication to camp with them:

Y N If Yes, please list:

I give my child permission to self-administer their medication:

Y N Initial: _____

I would prefer the camp nurse assist my child in administering their medication:

Y N Initial: _____

My child is aware that they may not share any medication with other campers.

Camper signature: _____

Initial if you approve of appropriate administration of the following other medications by the camp nurse:

Acetaminophen (initial) _____

Ibuprofen (initial) _____

Benadryl (initial) _____

Tums (initial) _____

Pre-existing conditions: Does your child have any existing injuries or conditions that would limit him/her from the camp activities?

Y N If Yes, describe:

Has your child had any hospitalizations, sport, or orthopedic injuries within the last year?

Y N If Yes, describe:

Has your child been diagnosed with any other significant chronic illness (diabetes, heart, epilepsy, etc.) that staff should be aware of?

Y N If Yes, describe:

If not covered above, please list any other medical or mental health conditions or concerns that Life Leadership Camp Staff should be aware of:

Minnesota Citizens Concerned for Life (MCCL) PHOTO RELEASE (MINOR)

I (We) hereby confer on Minnesota Citizens Concerned for Life (MCCL) the absolute and irrevocable right and permission with respect to the photographs or videos taken of my (our) minor child (children), taken individually or in which they may be included with others:

- a) To copyright the same in its own name or any other name it may select;
- b) To use, re-use, publish and re-publish the same in whole or in part, separately or in conjunction with other photographs, in any medium now or hereafter known, and for any legal purpose whatsoever, including (but not limited to) illustration, promotion, advertising and trade and;
- c) I (We) also waive my (our) right to review the context in which the photo(s) are to be used.

I (We) hereby release and discharge MCCL, its affiliated organizations and assigns from all and any claims and demands and causes for action whatsoever ensuing from or in connection with the use of the photographs including, but not limited to, libel and invasion of privacy.

I (We) have read the foregoing and fully understand the contents hereof. I (We) represent that (I am) (we are) the parent(s)/guardian(s) of the below named minors(s) and I (we) hereby consent to the foregoing on their behalf.

Minor's Name(s):

(print) _____

Parent/Guardian Name(s):

(print) _____

Signature 1: _____

Signature 2: _____

Address: _____

City: _____

State/Zip: _____

Date signed: _____

RULES

1. BE SAFE

- Water activities (swimming, kayaking, canoeing, paddleboats, etc.) must only be done with a Koronis Ministries lifeguard on duty. The scheduled time for these activities is 1-5 p.m. Please let a group leader know if you are planning on doing one of the water activities.
- If you are using the paddleboats, kayaks, canoes, etc., you must stay within the marked buoys.
- If you are using water equipment (canoes, kayaks, paddleboats, etc.) you ABSOLUTELY must wear a life jacket provided by Koronis Ministries.
- Smoking, alcoholic beverages, illegal drugs, fireworks, and firearms are prohibited.

2. BE RESPECTFUL

- Attending sessions is a requirement. If you are not able to attend, you must be excused by a group leader.
- Cell phones, iPads, tablets, and e-readers must be turned off during sessions.
- Listen to and obey group leaders if they ask you to do something. They are giving their time to help make your time at Life Leadership Camp a success.
- Be respectful of others – fellow campers, group leaders, guest speakers, and other people at Koronis Ministries.
- Be respectful of the camp grounds, dining area, dorm rooms, and retreat lodge – throw away garbage, pick up after yourself, put sports equipment away, etc.
- Koronis Ministries' quiet hours are from 11:00 p.m. to 7:00 a.m. You must be in the Retreat Lodge and in your dorm room by 11:00 p.m.
- Boys shall not go into girls' dorm rooms and girls shall not go into boys' dorm rooms – no exceptions. No boys on the second floor after Quiet Time.
- No dirty jokes, cussing, or rude/inappropriate behavior will be tolerated.
- Dress Code: Respectful, modest, casual clothing for warm and cool weather.

3. BE KIND

- Many people do not know each other, so if you notice someone who is alone and needs a friend, be that friend!
- While you are allowed to have your phones at camp, please don't be glued to them. Choose people over phones!
- Be creative in the ways you encourage others!

I understand that failure to follow camp rules, and any type of belligerent or disruptive behavior, will result in a call to my parents and dismissal from camp, as will any type of illegal behavior.

I have read and agree to the rules listed above:

(Student Signature)

(Date)

(Parent Signature)

(Date)

If you have any questions or concerns during your time at camp, please let us know. We want you to have a great time while you are at Life Leadership Camp, and we are happy to help you!