

Parent Authorization

In consideration of my child being permitted to participate in the Freedomgate Bible Camp, I, the undersigned parent/guardian, in full recognition and appreciation of the dangers and hazards inherent in participating in such activity, do hereby agree to assume all risks and responsibilities surrounding and pertaining to my child's participation in the activity, and further, I do for myself and my child's personal representative(s), heirs, and assigns, hereby agree to defend, hold harmless, indemnify, release and forever discharge Sheepgate Christian Fellowship, and all its pastors, deacons, elders, staff, and members from and against any all claims, demands and actions, or causes of actions, on account of damage to personal property, personal injury, or death which may result from my child's participation in said activity which results from causes beyond the control of and without the fault or negligence of Sheepgate Christian Fellowship, its pastors, deacons, elders, staff, and members during the period of my child's participation in the activity.

I agree that my child may participate in all camp activities as well as being transported to and from such activities by Sheepgate Christian Fellowship personnel.

I understand that as a participant, my child may be photographed or video taped during normal activities and the photos/videos may be used in promotional materials. I hereby release all claims of copyright for the use of my child's likeness in promotional materials and further waive all right to inspect such materials. I hereby release all claims of copyright for the use of my child's likeness in promotional materials and further waive all right to inspect such materials. I hereby release all claims of copyright for the use of my child's likeness in promotional materials and further waive all rights to inspect such materials. I understand that my family and my child's contact information may be shared with Sheepgate Christian Fellowship.

Info

If your child will be attending this year's camp please contact the following person or have registration forms in no later than

July 10, 2020

We will need your information by this time, so that we have an estimated headcount for food supplies and t-shirt order

Contact: Mandi Adkins
Phone: 256-599-8329
Email: freedomgatecamp@yahoo.com

Camp Fee: \$45.00 per camper

Checks payable to: Freedomgate Bible Camp

Camp fees and registration forms must be mailed in prior to registration day to the following address:

Sheepgate Christian Fellowship
P.O. Box 115 Princeton, AL 35766

Location: Sheepgate Christian Fellowship
4371 Alabama Hwy 65,
Paint Rock, AL 35764

Registration Time: Friday, July 17th
8:00 AM - 9:00 AM

Final Assembly:
Sunday, July 19th @ 4:00 PM



Pursue Teen Camp 2020

July 17th-19th Ages 13-19

www.sheepgatecf.com

Signature of Parent/Guardian

Date

Sheepgate
Christian Fellowship

A small illustration of a sheep standing to the right of the text.

Medical Information

Chronic or recurring illnesses or medical conditions (such as diabetes, heart defects, bleeding disorders, etc...)

Any allergies (food, drugs, animals, insects, etc...)

Current Medications:

If you bring any medications of any kind, please give specific instructions with them. The medications will be given to the camp nurse upon arrival and will be administered by her during the camp.

I give my permission to the camp nurse to administer to the camper the following over-the-counter drugs, if need be:

(Initial) Tylenol _____ Benadryl _____

Medical Release

I hereby grant permission to the director and/or designee to seek and/or administrator appropriate medical aid to my child in the event of an emergency. I hereby give permission to the medical personnel selected by the camp director to order x-rays, routine tests, or any treatment deemed necessary by a legally licensed physician; to release any records necessary for insurance purposes; and to provide or arrange necessary related transportation for my child. In the event I cannot be reached in an emergency; I hereby give permission to the physician selected by the camp director and/or his designee to secure and administer treatment, including hospitalization for my child. The completed form may be photocopied for trips out of camp.

I understand that it is my sole responsibility to notify the Freedomgate Bible Camp director of my child's medical needs. I certify I have indicated all medical history information regarding my child to Freedomgate Bible Camp and that all medical history is true and correct.

Parent/Guardian Signature



Registration

Child's Name: _____

Address: _____

Birthday: _____

Age: _____ T-shirt size: _____

Male: _____ Female: _____

Swimming Ability:

None _____ Avg. _____ Good _____

Parent/Guardian Contact Information

Home Phone #: _____

Cell Phone #: _____

Work Phone #: _____

Emergency Contact Information

Contact Name: _____

Contact Address: _____

Contact Phone #: _____

Items to Bring

Appropriate clothing, swimsuit (girls must bring one piece), Bible, paper, pen, sleeping bag, pillow, towels, washcloths, toiletries: shampoo, soap, toothbrush, toothpaste, insect repellent, sunscreen, comfortable walking shoes, (no open-toed shoes), flashlight.

DO NOT BRING

Magazines/books, weapons of any kind, alcohol, drugs, tobacco, gag/prank material, electronics: cell phones, iPods, video games, etc.

Canoe Waiver:

Each parent must sign a canoe trip waiver in addition to this application.

Sheepgate Christian Fellowship/Freedomgate Bible Camp Participant Release of Liability and Assumption of Risk Agreement for River Trip

PLEASE READ BEFORE SIGNING

Participant's Name :

Please Print Only

In consideration of being allowed to participate in any way in the program, related events and activities, I the undersigned acknowledge, appreciate and agree that: The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis or death.

- I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the Sheepgate Christian Fellowship/Freedomgate Bible Camp or others and assume full responsibility for my participation.
- I willingly agree to comply with the terms and conditions for participation. If I observe any unusually significant hazard during my participation and in my presence, I will safely remove myself from participation and bring attention of the hazard to the nearest official immediately.
- I, for myself and on behalf of my heirs, personal representatives and next of kin hereby release, indemnify and hold harmless Sheepgate Christian Fellowship/Freedomgate Bible Camp, its officers, officials, agents, employees, other participants, sponsors, advertisers and if applicable, owners and lessors of premises used to conduct the event from any and all claims, demands, losses and liability arising out of or related to any injury, disability or loss of life that occurs, or loss or damage to person or property, whether arising from the negligence of the Sheepgate Christian Fellowship/Freedomgate Bible Camp or otherwise as allowed by law.

For Parents or Guardians of Participant of Minor Age

Under Age 18 at Time of Registration

Your child will be transported off campus, via van, to canoe the Paint Rock River. They will wear life jackets and be in canoe or kayak and under adult supervision and will be transported back to campus by motor vehicle at end of trip.

This is to certify that I, as parent or guardian with legal responsibility for this participant, do consent and agree to this release as provided above, and for myself, my heirs and next of kin, I release and agree to indemnify and hold harmless Sheepgate Christian Fellowship/Freedomgate Bible Camp from any and all liability regarding incidents to my minor child's involvement or participation in these programs as provided above, even if arising from the negligence of Sheepgate Christian Fellowship/Freedomgate Bible Camp, as permitted by law.

Signature of Parent or Guardian _____

Date _____

Emergency Telephone Number _____