

NWD KIDS CAMP 2024

Kids Application

(1st-6th grade completed)

Name _____ Boy _____ Girl _____

Address _____ City _____ State _____ Zip _____

Phone _____ Age _____ Birth date _____ Grade Completed _____

Church (full church name) _____

List two friends that your child would like in their cabin (we will room them with at least one of these friends) _____

T-shirt Size: (circle one) YS YM YL AS AM AL

HEALTH HISTORY: PLEASE INDICATE IF YOUR CHILD SUFFERS FROM THE FOLLOWING:

___ Frequent ear infections

___ Hypertension

___ Asthma

___ Hay fever

___ Diabetes

___ Ivy Poisoning

___ Convulsions

___ Epilepsy

___ Insect reactions

___ Bleeding/Clotting Disorder

___ ADHD

___ Physical Disabilities

Allergies _____

Current medications (with instructions) _____

Reason for medication _____

Any restrictions that we should know about your child? _____

Last tetanus shot _____ Does your child wet the bed? _____

IN CASE OF EMERGENCY/RELEASE FORM/MEDIA RELEASE

I _____ being the parent or legal guardian of _____ born ___/___/___ do for ourselves (myself and for and on behalf of my child-participant), do hereby release, forever discharge and agree to hold harmless IFCA & NWD Kids Ministry and the directors and staff thereof from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage, expenses, and any lost or stolen goods, or any nature whatsoever which may be incurred by the undersigned and the child-participant that occur while said child is participating in above-described trip or activity. Furthermore we (I) (and on behalf of our (my) child-participant) hereby assume all risk of personal injury, sickness, death, damage and expenses as a result of participation in recreation and work activities involved therein. The undersigned further hereby agree to hold harmless and indemnify said church, its directors, employees and agents, for any liability sustained by said church as the result of the negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto. We (I) are parent(s) or legal guardian(s) of this participant, and hereby grant our (my) permission for him (her) to participate fully in said trip, and hereby give our (my) permission to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not in limitation to emergency surgery or medical treatment, and assume the responsibility of all medical bills. If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process.

Parent/Legal Guardian _____ Date _____

Insurance Company _____

Group # _____ ID # _____

Emergency Contact _____ Phone Number _____

Media Release:

During the week of NWD Kids Camp, NWD Kids takes photographs and/or makes an audio or videotape recording of children and/or adults involved in camp activities, such photographs or video records may be used by staff and participants to remember the event. In addition, such photographs and audio/visual recording may be used by NWD Kids in publications or advertising materials. In addition, NWD Kids would like to share with families, friends and other churches before, during and after camp via social media and on the NWD website. I consent to the use of any such audio or visual record of the child named above to be used, distributed, or displayed as the agents of the NWD see fit. This consent includes but is not limited to: photographs, videotapes, audio recordings, social media and the NWD webpage.

*****CIRCLE: Consent: YES / NO** **Parent/Guardian Signature** _____ **Date** _____

COVID-19 Release:

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have instituted preventative measures to reduce the spread of COVID-19.

Though restrictions have loosened in the state of Pennsylvania, we, NWD Kids Camp (NWD Kids Ministry) cannot guarantee that your children will not become infected with COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and the risk associated with sending my children to NWD Kids Camp. I voluntarily assume this risk that my children may be exposed or infected and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed or infected by COVID-19 at NWD Kids Camp may result from the actions, omissions, or negligence of myself and others, including, but not limited to, camp employees, volunteers, and program participants.

I understand that my child must be free from COVID-19 symptoms before arriving to NWD Kids Camp and, should symptoms develop while in the care of NWD Kids Camp, my child will be separated from the rest of the people. I will be contacted and my child must be picked up within 12 hours of my being notified. I understand that my child will participate in a brief health screening by our NWD Kids Camp nurse upon arrival. I understand that whether or not my child wears a mask is up to my discretion, as it will not be mandated by NWD Kids Camp. I further voluntarily agree that NWD Kids Camp may monitor my child for symptoms of COVID-19.

I voluntarily agree to assume all of the foregoing risks and accept all responsibility for any injury to my child, illness, damage, loss, claim, liability, or expense, of any kind, that my child may experience or incur related to COVID-19 in connection with attendance at NWD Kids Camp.

Parent/Legal Guardian

Signature: _____

Printed: _____ Date _____

****Please complete this form and return it with registration deposit to Kids' Leader/Pastor****

****Group registration & this form will then be sent to Kids' Camp Leader by your leader****