

Highland Lakes Camp & Conference Center

A Ministry of the Baptist Churches of Central Texas

5902 Pace Bend Road North

Spicewood, TX 78669

512.264.1777

888.222.3482

Fax: 512.264.2794

www.highlandlakescamp.org

email: camp@highlandlakescamp.org

Adult Release Form

(front and back)

First Name _____ Last Name _____

Birthdate ____ / ____ / ____ Age _____ T-shirt size _____

Address _____

City _____ State _____ Zip _____

Phone (H) _____ Phone (W) _____ email _____

Social Security No. _____ (most Hospital's require this number)

Name of Church or Group with whom you are attending (include city) _____

Medical Information

Are you presently taking any medications? Yes No

Please list all medications, dosages, and times for each dose below.

medication	Dosage	Time for each dose
------------	--------	--------------------

medication	Dosage	Time for each dose
------------	--------	--------------------

Please include any further list on an additional sheet. (include name and church/group name on sheet).

State law requires all medications to be placed in the campus Health Center. Please bring all medications in a zip-lock bag labeled with your name, medicine, and church/group name.

If you are allergic to any medications, please list: _____

Family Physician _____ Phone _____

In case of an emergency, please contact _____ Phone _____

Insurance Provider & Group # _____ Phone _____

I, _____ acknowledge the above information is correct to the best of my knowledge. Furthermore, I give permission to Highland Lakes Baptist Encampment's staff to provide & authorize any medical treatment necessary.

signature date

Pastor, Staff, Group Director Statement (State Law Requirement)

The person above is known by me and, to my knowledge, this person has not been convicted of any crimes committed against minors in his/her background. I assume full responsibility for this person serving as a camp counselor working with minors.

Signature of Pastor, Staff Member, or Group Director Date Phone

AGREEMENT TO ATTEND, PARTICIPATE, ASSUMPTION OF RISK
& RELEASE OF LIABILITY FORM

HIGHLAND LAKES BAPTIST ENCAMPMENT d/b/a HIGHLAND LAKES CAMP & CONFERENCE CENTER hereinafter referred to as the "Camp" requires a signature for all attendees of the Camp and all participants of any Camp activity including, but not limited to, Challenge/Ropes Course (highs and lows), Water Crafts, Water Toys, Swimming Pool, Bicycle Course, Backpacking, Camping, Basketball, Football, Baseball, Softball, Volleyball, and any and all other camp and recreational sports and activities. Furthermore this form releases the Camp to photograph and/or use photographs of myself or my child for use in its publications, advertising, promotional purposes, internet, and/or visual presentations which inform people of the services and activities of Camp. The signature provided confirms this Agreement to Attend, Participate, Assumption of Risk, and Release Form in order to attend Camp and to participate in any Camp activity.

Attendance and Activities at Camp may include warm-ups, games, group initiative problems, high and low challenge course, and/or other rigorous physical adventure activities as well as exposure to the elements, exposure to animals, snakes and insects. Camp takes all reasonable precautions to ensure you a safe and enjoyable experience. Parts of the experience, by their nature, can be physically demanding and include varying levels of stress and anxiety, not all of which can be foreseen. The decision to attend the Camp and the decision to participate in any Camp activity at any level **IS AT ALL TIMES COMPLETELY UP TO THE INDIVIDUAL'S CHOICE** and, if there is attendance at the Camp and participation at any level of any Camp activity, there is a risk, which must be assumed by each attendee and by each participant. Although it is the Camp's goal to maintain the physical, emotional and social safety of each attendee and participant of the Camp, the physical, emotional and social risks must be assumed by each attendee and participant.

"I understand that attendance at the Camp and participation in any Camp activity may be physically and emotionally demanding. I recognize the inherent risk of physical and/or emotional injury of attending Camp and participating in any and/or all Camp activities. I understand that each participant must assume the risk of any injury, physical and/or emotional, and any financial responsibility that could result from attending Camp and participating in any Camp Activity. **I agree to assume such risks and such responsibility. I, on my behalf, and on behalf of my heirs and assigns, hereby release, indemnify and hold harmless Highland Lakes Encampment d/b/a Highland Lake Camp and Conference Center from any and all claims, physical and emotional, including bodily injury, that I may have that may be sustained in connection with my attending Camp and with my participation in any and/or all Camp activities.**"

If you feel that there are any activities in which you or your child should not be involved in, please describe for us on an attach sheet the activities (include name and church/group name on the sheet). I have read (or had read to me) this complete document and I understand the information contained herein. I have freely and voluntarily signed this document.

Signature of Attendee/Participant over 18 years old

Date

AUTHORIZATION FOR EMERGENCY MEDICAL/DENTAL TREATMENT

"I hereby authorize the staff of Camp to arrange and secure necessary emergency medical and dental treatment. I realize I am responsible for any charges for these services."

Signature of Attendee/Participant over 18 years old

Date