



Camp Trinity Waiver and Medical Emergency Release

Each camper **MUST** have their own medical coverage. Trinity Academy provides only excess coverage after your insurance policy has been utilized. Campers will not be allowed to attend unless the following information is submitted and the form is signed by the parent or guardian of the camper(s).

Camper Info:

Address: _____ City: _____ State: _____ Zip: _____

Camper #1, Name: _____ Birth Date(Age): _____

Camper Allergies? Yes:___ No:___ If yes, please describe; fill out Medication Form as applicable:

Please list any additional information Camp Trinity should be aware of (special circumstances):

Camper #2, Name: _____ Birth Date(Age): _____

Camper Allergies? Yes:___ No:___ If yes, please describe; fill out Medication Form as applicable:

Please list any additional information Camp Trinity should be aware of (special circumstances):

Camper #3, Name: _____ Birth Date(Age): _____

Camper Allergies? Yes:___ No:___ If yes, please describe; fill out Medication Form as applicable:

Please list any additional information Camp Trinity should be aware of (special circumstances):

Parent/Guardian Info: Contact 1 will be contacted first as need arises

Contact 1: Name: _____ Phone: _____

Email: _____ Relationship to Camper: _____

Contact 2: Name: _____ Phone: _____

Email: _____ Relationship to Camper: _____

Medical Insurance Company: _____ Phone: _____

Policy Holder: _____ Policy Number: _____

Authorized Pick-Ups: Additional pick-ups may be authorized via email after form submission

#1: Name: _____ Phone: _____

Relationship to Camper/Other Information: _____

#2: Name: _____ Phone: _____

Relationship to Camper/Other Information: _____

Trinity Academy of Raleigh Liability Release & Acknowledgement

Participation in a Trinity Academy of Raleigh camp involves the risk of injury including, but not limited to collision with other participants, being hit by the ball, falling onto the floor or into a wall, scratches, bruises, sprained and broken ankles and other body parts. By submitting this registration for my child's participation in this program, I acknowledge that I am requesting that my child have the opportunity to participate in this program and that I, on behalf of myself, my child, heirs, assigns, executors and administrators (a) acknowledge all risks of injury and death associated with participation in a Trinity Academy of Raleigh camps (b) assume responsibility should injury and death result from these risks, (c) waive any legal rights we may have to seek payment of any kind from Trinity Academy of Raleigh camps, and the owners, operators, administrators, employees and agents of the facility at which this Trinity Academy of Raleigh Camp is being held for bodily injury or death resulting from participation in this Trinity Academy of Raleigh camp, and to release these parties from any liability for damages resulting from injuries and death, (d) acknowledge that no additional insurance coverage is provided by Trinity Academy of Raleigh. and the owners, operators, administrators, employees and agents of the facility where this Trinity Academy of Raleigh camp is being held, (e) agree to follow all rules and procedures of the program and reasonable instructions of the coaches and Trinity Academy of Raleigh employees.

Program Policies

Please read each of the following policies and sign below to indicate your understanding of these policies. Policies are subject to all applicable laws.

Waivers/Permissions:

1. I permit my child to participate in activities Camp Trinity conducts outside the fenced-in play areas at Camp Trinity's facilities.
2. Field Trips – I permit my child to leave Camp Trinity on authorized trips under the supervision of Camp Trinity staff.
3. Photography/ Audio – I give Camp Trinity and its employees and agents permission to use for any lawful purpose my and/or my child's likeness, image, voice and/or appearance as such may be embodied in any pictures, drawings, renderings, photographs, video recordings, audiotapes, digital images or the like, with the understanding that Camp Trinity will not publish my child's name. I agree that Camp Trinity has complete ownership of such pictures, etc., including but not limited to illustrations, bulletins, exhibitions, videotapes, reprints, reproductions, publications, advertisements and any promotional or educational materials in any medium now known or later developed, including but not limited to the internet, television, radio, newspapers, magazines, social media sites (e.g., MySpace, Facebook, Twitter, Flickr, etc.), and/or Camp Trinity audio, print or internet publications. I also agree that Camp Trinity has permission to release such pictures, etc. to the news media. I acknowledge that I will not receive any compensation or remuneration for the use of such pictures, etc. I understand that once such pictures, etc. are published to the media or on the internet, or are otherwise published, they may be used in publications and/or on websites outside of Camp Trinity's control.
4. Transportation – I understand and agree that for Camp Trinity programs providing transportation for my child, Camp Trinity's liability for my child begins when the child boards a Camp Trinity vehicle and ends when the child exits the vehicle. Under some circumstances, Camp Trinity liability will continue if my child is exiting the Camp Trinity vehicle to participate in a Camp Trinity program. Pickup and drop off points will be determined prior to my child attending the program for which he/she is registered. If Camp Trinity staff encounters circumstances that they perceive as dangerous at the location where my child is scheduled to exit a Camp Trinity vehicle, my child will not be permitted to exit.
5. Babysitting Policy – Camp Trinity strives to employ the very best staff possible in all of our programs. During staff time off or after they are no longer employed with Camp Trinity, these persons are private citizens and are no longer subject to our employment rules and procedures. Camp Trinity cannot and does not endorse or recommend its present or former staff members as babysitters to any parent or guardian of any child in any of our programs. Any babysitting arrangements with present or former staff of Camp Trinity is separate and independent from any Camp Trinity program and must be based on the independent investigation, responsibility and judgment of the parent or guardian. I agree that Camp Trinity shall not be responsible and will be held harmless from any claims or liability in connection with such babysitting activities.
6. Indemnity – I understand that Camp Trinity activities have inherent risks, and I hereby assume all risks and hazards incident to my participation/my child's participation in all Camp Trinity activities, and recreation activities provided by third party vendors. I further waive, release, absolve, indemnify and agree to hold harmless Camp Trinity and its employees, organizers, volunteers, vendors, supervisors, officers, directors, participants, coaches and referees, as well as all persons or parents transporting participants to and from activities, from any legal claims, liabilities, damages and costs for any physical injury or damage to my personal property sustained during my use of Camp Trinity property and/or my participation/my child's participation in any Camp Trinity activities.
7. I understand that Camp Trinity is not responsible for any personal items lost or stolen at our programs.
8. Inclement Weather – I understand that programs are not available when school is closed due to inclement weather.

Payment Policies: I understand policies concerning payment, cancellation and refunds. I may not register my child for a new program until outstanding balances due on past programs of Camp Trinity are paid.

Insufficient Funds – If my bank returns a draft or check, due to insufficient funds, immediate payment is required to keep my child's account up to date. I understand that I will be charged \$35 for each returned check or draft. I will need to send cash, money order or a certified check for the draft or check within 10 business days after I receive a notification letter from Camp Trinity. Personal checks will not be accepted. Payment in full is required before my child can continue to participate in Camp Trinity programs.

12. Cancellations: Nonattendance, without written cancellation, does not relieve me of the responsibility to pay for the program. I will refer to the registration receipt for details on specific program cancellation policies.

14. Refunds – I understand that nonattendance does not entitle me to a refund. I understand that no refunds or adjustments are granted for illness, vacation or when Camp Trinity programs are canceled due to inclement weather. All refunds or program credits given for other reasons are issued on a prorated basis. I understand that Camp Trinity reserves the right to apply any credit due to other outstanding balances. I will refer to the relevant policy and procedure information for details on specific program refund policies.

Medical Treatment Policies:

Accident Insurance – Participants are responsible for their own accident insurance when using Camp Trinity and when participating in Camp Trinity programs offsite.

Medication – Camp Trinity does not normally administer any medication and will do so only when directed in writing by the child's parent or guardian. Medications must be in original containers with written instructions for dispensing. Do not send medications with your child. A parent or guardian must give the medication to

program staff. Notice: The staff of Camp Trinity will not administer shots or medications that have to be inserted into body cavities. The one exception to the foregoing is EpiPen injections. When special circumstances exist, personnel from Camp Trinity will be available to meet with the parent(s) or guardian(s) of the child in question and strive to develop through dialogue a mutually acceptable alternative way to make sure the medication requirements of the child are met.

Blood Borne Pathogen Exposure – I understand that, while my child is in the care of Camp Trinity, if a child is exposed to a body fluid on broken skin or mucous membrane (e.g. splashing in mouth or eye) from another child, Camp Trinity will contact the parents of both children. They will explain what has occurred, and provide the name of the attending physician of the source child to parents of the exposed child. If a staff member has a blood or body fluid exposure from a child, Camp Trinity will provide the name and telephone number of the child's attending physician to the staff member. I have read and agree with the statement and specifically authorize Camp Trinity to release the name and telephone number of my child's physician and a description of the event to the parent or guardian of any child who is exposed to blood or body fluid or to any staff member who experiences such an exposure from my child.

Emergency – In the event of an emergency in which the parent/guardian or listed emergency contacts cannot be reached, Camp Trinity will contact emergency medical personnel and, pending their arrival, take those actions that are in Camp Trinity's judgment to be in the best interests of the child.

Behavior Expectations and Discipline Policies

It is important that staff maintain good order and discipline in all programs. Top objectives in all Camp Trinity programs are safety and a positive atmosphere for learning and developing social skills. Camp Trinity makes every effort to help children understand clear definitions of acceptable and unacceptable behavior. Camp Trinity does not condone and will not permit:

1. Corporal punishment
2. Ridiculing, threatening, using an inappropriate loud voice
3. Leaving children unsupervised
4. Use of profanity

A child's behavior is expected to be consistent with the following:

5. Use appropriate language at all times.
6. Cooperate with staff and follow directions.
7. Respect other children and staff, equipment and facilities, and yourself.
8. Maintain a positive attitude.
9. Stay in program areas—running away is not acceptable.
10. Participate successfully within the Camp Trinity staff-child ratios specific for each program.

Camp Trinity Discipline Policy

11. If a child is unable to comply with the behavior expectations, a conference will be held by the program director with the child. The parent(s)/guardian will be notified.
12. If after the above meeting the child is still unable to comply with the behavior expectations, the program director will set up a conference with the parent(s)/guardian. A behavior contract will be established and signed by the parent(s)/guardian and the program director.
13. If the child's behavior continues to be disruptive and/or unsafe, the child will be subject to suspension or dismissal.
14. Failure of the parent(s)/guardian to attend conference(s) and cooperate will subject the child to suspension or dismissal.

Behaviors which may result in immediate suspension or dismissal include, but are not limited to:

15. Any action that could threaten or pose a direct threat to the physical/emotional safety of the child, other children or staff. Prohibited conduct may include, but is not limited to, abusive jokes, insults, slurs, threats, name calling, bullying or intimidation.
16. Fighting
17. Possession of a weapon of any kind
18. Vandalism, destruction, or theft of Camp Trinity property or property of others
19. Sexual misconduct
20. Possession of or use of alcohol. Possession of or use of controlled substances unless under the prescription of a doctor.
21. Running away
22. Biting

Special Circumstances: Parents or guardians are required to inform Camp Trinity in writing, prior to a child's acceptance in a Camp Trinity program, of any special circumstances which may affect the child's ability to participate fully and within the guidelines of acceptable behavior, including but not limited to any serious behavioral problems or special circumstances regarding psychological, medical or physical conditions. Upon being informed of such circumstances, the camp director may require a conference with the parent(s)/guardian to discuss issues created by these circumstances. I understand and acknowledge that: (i) it is the responsibility of the parent(s)/guardian to make full disclosure to Camp Trinity of any special circumstances which may affect the ability of my child/ward to participate, as described above; (ii) it is the responsibility of the parent(s)/guardian to inform Camp Trinity of any requested accommodation believed by the parent(s)/guardian to be necessary and readily achievable for such participation; and (iii) full disclosure of any special circumstances is material to Camp Trinity's evaluation of the child's/ward's ability to participate and Camp Trinity's consideration of any requested accommodation. I have read, understand and agree with the policies as stated in this document and have discussed the expectations of behavior with my child/ward. I understand that Camp Trinity has the authority to revoke my child's right to participate in Camp Trinity programs for behavior which is not in keeping with the mission of Camp Trinity or for failing to follow the policies/procedures of Camp Trinity. My signature below indicates that I agree to adhere to all policies, procedures and the mission of Camp Trinity.

Please sign, indicating you have read and understand the all of the above policies, procedures and expectations:

Print Name: _____ **Camper(s) Name:** _____

Signature of Parent/Guardian: _____ **Date:** _____