

RELEASES AND PERMISSIONS:

The undersigned parent/legal guardian of the above stated participant, hereby states that my above named child/ward has my permission to participate in the following described program, tour, event, or trip sponsored by the Northwest District Church of the Nazarene, Spokane, Washington: District NYI Summer Camp at Riverview Bible Camp. The undersigned does hereby release, indemnify, and save Northwest District Church of the Nazarene, Spokane, Washington, its agents, employees, elders, ministers, staff and members, of and from any and all liability or responsibility in connection with any loss or damage sustained by the herein named Participant, including, but not limited to accident, bodily injury, death or property damage, as a consequence of or resulting or arising from or in any manner growing out of any act, omission, or negligence of Northwest District Church of the Nazarene, Spokane, Washington, its agents, employees, elders, ministers, staff, and members in connection with the herein designated program, tour, event or trip. The undersigned does further authorize Northwest District Church of the Nazarene, Spokane, Washington, its agents, employees, elders, ministers, staff and members, to provide or cause to be provided any and all medical attention or treatment as may, in the discretion of Northwest District Church of the Nazarene, Spokane, Washington, its agents, employees, elders, ministers, staff and members, be necessary or advisable, to the child/ward herein named, while such child/ward is participating in the herein designated event and further indemnifies and holds harmless Northwest District Church of the Nazarene, Spokane, Washington, its agents, employees, elders, ministers, staff and members, of and from any liability resulting from any medical malpractice claim made in connection with the furnishing of such medical attention and/or treatment.

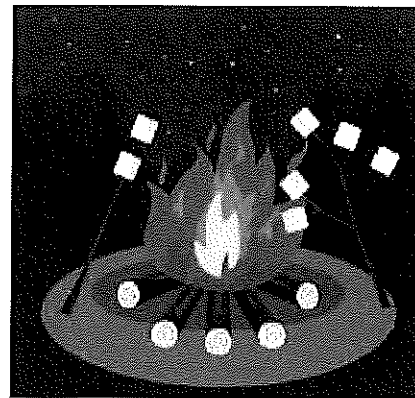
Parent/Guardian Signature

Date

In consideration of RIVERVIEW BIBLE CAMP, I for myself, or the minor child named below, forever waive, release and discharge RIVERVIEW BIBLE CAMP (and its parent corporation) from any/all injuries, claims, disputes, liabilities, or actions resulting from RIVERVIEW BIBLE CAMP providing services for me and for my benefit regardless of location for the dates identified above, except for injury or damage arising out of Riverview Bible Camp's negligence or willful misconduct. I attest and verify that I have full knowledge of the risks and dangers involved; that I assume such risks, and that I will assume and pay my own medical and emergency expenses, in the event of an accident, illness or other incapacity, regardless of whether I have authorized such expenses. Any controversy arising out of, connected to, or relating to any matters herein of the transactions between me and the above named parties or on behalf of the minor child named below, of this Release/Waiver, or the breach thereof, including, but not limited to any claims of violations of Federal and/or State Law, as well as any common law claims shall be settled by arbitration through Christian Conciliation Services; and in accordance with this paragraph a judgment based upon the arbitrator's award may be entered in any court having jurisdiction thereof in accordance with the provisions of R.C.W. 7.04. This agreement shall be construed and interpreted under the laws of the State of Washington. I HAVE READ THIS WAIVER AND RELEASE CAREFULLY, AND UNDERSTAND IT.

Parent/Guardian Signature

Date



NW NYI Camp
2018 Student Registration

July 23-27

We are excited that you have a camper(s) attending camp! Please read every question carefully and answer accordingly. The legal guardian email will be used for a confirmation email that you will receive within 2 weeks of registration along with any important updates and reminders.

Camper's First Name: _____

Camper's Last Name: _____

Camper Gender: _____ Male _____ Female

Grade Level: (Grade camper just completed in June 2017)

_____ 6th Grade _____ 9th Grade _____ 12th Grade
 _____ 7th Grade _____ 10th Grade
 _____ 8th Grade _____ 11th Grade

Camper's T-Shirt Size:

_____ XS _____ L _____ XXXL
 _____ S _____ XL
 _____ M _____ XXL _____ Other:

Camper's Phone Number: _____

Mailing Address: _____

Legal Guardian's Name: _____

Legal Guardian's Phone: _____

Parent's Email Address: _____

Camper's Email Address: _____

Home Church: _____

How I'm Paying for Camp:

- I am paying through my church/youth pastor
 I am making a partial payment for camp myself

NYC '19

Yes No

HEALTH AND WELLNESS QUESTIONS:

Help us provide the best care for you camper as well as providing a safe camping experience for everyone by giving us the most accurate information on your camper's health.

Health and Wellness Continued

Health Insurance Provider / Company: _____

Insurance Policy Number: _____

Insurance Phone Number of Company _____

List any allergies, major surgeries or other medical conditions chaperons should be aware of: _____

List any prescription medications: _____

Emergency Contact Information:

Emergency Contact Person(s) Name & Relationship: _____

Emergency Contact Phone Number: _____

Emergency Contact Secondary Phone Number: _____

Emergency Contact Email Address: _____

Camper's Health

I, the legal guardian, will do everything I can to send my child to camp in the best health including, but not limited to; being aware of any fever, vomiting or other signs of sickness, checking them for Lice (live or eggs), and reviewing good hygiene before I send them to camp. If I find any significant health issues for my teen, I will communicate with the camp director so we can discuss options and/or whether to withhold my teen from attending camp (full refund provided).

_____ **I AGREE**