

Participant Agreement

Phone: 440-272-5275 Fax: 440-272-5276

7983 S. Wiswell Rd. Windsor, OH 44099 Email: campwhitewood@osu.edu www.4hcampwhitewood.com

Last Name:

First Name:

I hereby enroll my child in 4-H Camp Whitewood's camping program. In signing this agreement, I certify that he/she is healthy and free of problems that could adversely affect his/her stay or that of the other campers at 4-H Camp Whitewood.

I understand that my child must comply with the camp's rules and standards of conduct and that the organization may terminate my child's participation in the camp program if he/she does not maintain these standards.

I understand the applicant will be participating in outdoor educational activities including but not limited to recreational games, lakefront activities including boating and swimming, archery and firearms, camp fires and camp fire cooking, group skits, sing alongs, crafts, hiking, creek walking, team challenge activities while participating in a resident camp community. For Specialty Camps, I understand the applicant will be participating in the aforementioned activities and other activities specific to the Specialty Camps: trips away from camp, wilderness overnight camping and interacting with dogs. I understand the risks associated with these activities and release 4-H Camp Whitewood, and the directors, trustees, officers, volunteers and employees of 4-H Camp Whitewood, from all liability for damages or injuries resulting from negligence or defects. I grant permission for the applicant to participate in all camp activities.

I hereby grant 4-H Camp Whitewood and its agents full authority to take whatever actions they deem necessary regarding the campers' health and safety, and I fully release 4-H Camp Whitewood from any liability in connection there within. In the event of an emergency, I understand that prudent attempts will be made to contact the undersigned immediately. In addition, I give permission to the medical personnel selected by the camp director to provide routine health care; to administer medications; to order X-rays, routine tests, treatment; 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 to secure and administer treatment, including hospitalization, for the person named above. I understand that the employees and volunteers of Northeastern Ohio 4-H Camps, Inc. (4-H Camp Whitewood), Ohio State University Extension (OSUE), The Ohio State University and Ohio 4-H are not responsible in the event of accidental injury or illness, nor for the compounded injury or illness to the participant's present medical conditions. Please check and sign here if you do <u>not</u> grant permission to treat your child under the above circumstances:

Parent/Guardian Signature

I understand that I will be responsible for payment of all emergency transportation, medical and medication bills. 4-H Camp Whitewood and OSUE is not responsible for lost, stolen, or damaged personal articles.

I individually and corporately agree to hold harmless 4-H Camp Whitewood, OSUE its volunteers, agents, employees and officers irrespective of any negligent act or omission by 4-H Camp Whitewood and/or those individuals arising from or related in any way to this 4-H Camp Whitewood program.

All deposits are non-refundable.

I give 4-H Camp Whitewood and OSUE permission to publish in print, electronic, or video format the likeness or image of my child. I release all claims against 4-H Camp Whitewood and OSUE with respect to copyright ownership and publication including any claim for compensation related to use of the materials.

Please check here if you do not give permission to publish the image or video of your child:

Signature Required			
Parent/Guardian Signature		Date	
Camper Signature (if over 18)		Date	
			Revised 1/2013

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4-H CAMP WHITEWOOD Restricted Release Form

I, Legal Parent or Guardian	_, hereby authorize only th	ne person(s) listed below to pick up
Camper Name	from camp session	Session name and/or dates
Name(s) of person(s) authorized t	to pick up my child:	
1	Phor	e
2	Phor	e
3	Phor	e
	l, and/or anyone that you	ual(s) who should not be in contact with wish to NOT pick up your child from camp,

If my pickup plans change, I understand that I must call 4-H Camp Whitewood's Health Lodge at (440) 272-5512 or the Camp Office at (800) 967-CAMP.

Signature Required	
Parent or Guardian Signature	Date
	Date

Check-In Permission

If someone other than a parent/guardian will be **dropping off** your child at camp on the first day of camp, please complete the following:

I,, hereby authorize _		to
Parent or Guardian	Adult bringing child to camp	
check in my camper and discuss my camper's health form on my behalf.		

Signature Required	
Parent or Guardian Signature	Date



Camper Rules 7983 S. Wiswell Rd. Windsor, Ohio 44099

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	Last Name:	First Name:	
Please read, discuss and s	ign these rules with your camper.		
These rules have been designed to ensure the safety of the campers and to provide an emotionally safe and welcoming environment at camp. Each camp session may have additional rules but the following rules will be enforced at all camp sessions.			
counselor or staff m 2. Campers will not de 3. Always respect the v 4. Follow all posted sig 5. Cell phones, iPods, v allowed, except in re 6. Campers will show r a. No bullying b. No obscene c. No offensive d. Wear tasteff e. Respect the 7. The following items a. Drugs, alcoh b. Weapons (g c. Animals (EXC d. Personal spo 8. If the camper is 16 of ONLY if all paperword turned in upon arriv	espect to others: or violence. Every camper is unique and import language. Be aware of how your words may af	affiti. np Whitewood. t allowed at camp. Car ant at camp. fect someone else. e graphics/print. ng without asking. ts to bring a dog), pment, etc.). per may drive him/her nce by the parent. Car e camper. alled and the camper m per belongings for proh	meras are self to camp keys will be
Signature Required	•	•	
<u> </u>			
Camper Signature		Date	
Parent/Guardian Signature	Date		
			Revised 10/2013