

Hands and Feet Ministries Presents
2020 Summer Camps at Mountaintop Retreat

Register Online or Mail this form to: Hands & Feet Ministries PO Box 615 Olathe, CO 81425
Registration and Acknowledgment of Risk Release and Waiver Form (One form per person, please.)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

E-mail: Address: _____ Home Church: _____

If you are a minor, your parent/guardian needs to read and sign the following:

1. I agree to waive any and all rights and claims for damage that I or my spouse may have against Hands and Feet Ministries and its agents, employees, and representatives, as well as against Mountaintop Retreat (or other specified rental facility), and its agents, employees, and representatives, for any and all injury, damage, or loss sustained by my child arising directly or indirectly out of their time at Mountaintop Retreat (or other specified rental facility).
2. I further agree that, in the event that I, my spouse, my child or another child in my care should make any claim against Hands and Feet Ministries or Mountaintop Retreat (or other specified rental facility) for damage, injury, or loss arising directly or indirectly out of being at Mountaintop Retreat, I will personally indemnify, defend and hold harmless Hands and Feet Ministries and Mountaintop Retreat (or other specified rental facility), as well as their agents, employees, and representatives against any and all such injury, damage, or loss.
3. I authorize Hands and Feet Ministries, Mountaintop Retreat (or other specified rental facility), or their representative to obtain any medical treatment for the participant that should appear to be necessary during your child's time at Mountaintop Retreat (or other specified rental facility), and I will be responsible for the payment of expenses relating to such illness or injury.
4. I authorize Hands and Feet Ministries to use any photographs of me, my spouse, and/or my children taken while participating in camps or other ministry activities to be used by Hands and Feet Ministries for the purposes of advertising and/or promoting future camps. NOTE: Please, contact us if you need to opt out of this photography authorization. We understand there are extenuating circumstances and we respect your privacy.

I affirm that I have the right to authorize and agree to the foregoing. I have carefully read and understand this agreement and have willingly place my signature below as evidence of my acceptance of all the conditions contained herein.

Print name of parent/Guardian: _____

Signature of parent/guardian: _____ Date: _____

Please circle a session:

Teen session: Ages: 13-18 Dates: June 8th-11th, **Junior High session:** Ages: 11-13 Dates: June 15th-18th,
Junior session: Ages: 9-11 Dates: June 22nd-25th, **Kids session:** Ages: 6-8 Dates: June 26th-27th.

If you are an adult, you need to read and sign the following: Please circle the session attending above:

1. I agree to waive any and all rights and claims for damage that I or my spouse may have against Hands and Feet Ministries, Mountaintop Retreat, and their agents, employees, and representatives for any and all injury, damage, or loss sustained by the my child arising directly or indirectly out of the time at Mountaintop Retreat.
2. I further agree that, in the event that I should make any claim against Hands and Feet Ministries or Mountaintop Retreat (or other specified rental facility) for damage, injury, or loss arising directly or indirectly out of being at Mountaintop Retreat, or any other rental facility, I will personally indemnify, defend and hold harmless Hands and Feet Ministries, Mountaintop Retreat (or other specified rental facility), and their agents, employees, and representatives against any and all such injury, damage, or loss.
3. I authorize Hands and Feet Ministries to use any photographs of me, my spouse, and/or my children taken while participating in camps or other ministry activities to be used by Hands and Feet Ministries for the purposes of advertising and/or promoting future camps. NOTE: Please, contact us if you need to opt out of this photography authorization. We understand there are extenuating circumstances and we respect your privacy.

I affirm that I have the right to authorize and agree to the foregoing. I have carefully read and understand this agreement and have willingly placed my signature below as evidence of my acceptance of all the conditions contained herein.

Signature of adult: _____ Date: _____

Cost- Teen session: \$75.00, Junior High session: \$75.00, Junior session: \$75.00, Kids session \$35.00.

(Please, Choose One) Cash or Check on Arrival: _____ Check Enclosed: _____

(Make Checks Payable to **Hands and Feet Ministries**)

HANDS AND FEET MINISTRIES MEDICAL RELEASE FORM

Instructions: Please print neatly and fill in all the information asked for on this form. Bring this page with you to register on the first day of camp.

Camper's Name _____ Age _____ Birth Date _____ Sex: M _____ F _____

Person to contact in case of emergency _____

Home Phone _____ Work Phone _____ Cell Phone _____

Name of the person who is authorized to pick up this child: _____

Name of the person who is not authorized to pick up this child: _____

Camper's Health Information

MEDICAL AND INSURANCE INFORMATION:

All campers are covered during their stay by Church Mutual Insurance and subject to the limits thereof, Individual Insurance is primary.

Does the camper whose name appears on this form have medical insurance? Yes No

Camper's insurance Company Name: _____ Policy Number: _____

Address: _____ Telephone: _____

Date and History of a serious illness in the last 12 months:

Date and History of any surgeries in the last 12 months:

Name ANY Allergies:

Penicillin or other drug requirements: Yes No If Yes, Specify:

Special dietary requirements:

IMMUNIZATION RECORD DATES:

Please bring a copy to give to the medical staff.

Public Health Nurse or Licensed Physician's Exam

Campers can present a statement confirming a physical examination which has been performed within the preceding twenty-four months by a licensed physician or qualified, licensed nurse practitioner.

Campers can choose to be examined by the camp nurse.

I have examined this camper and found him/her to be satisfactory physical condition, free from any contagious diseases and capable of active participation in regular camp programs except as follows:

Signature of Examiner _____ Date: _____

Address of Examiner: _____ Telephone Number: _____

Name of Medication(s):

Directions for use of Medication:

Important Information

DIRECTIONS TO MOUNTAINTOP RETREAT: 339 Bible Camp Road in Montrose, CO 81403. The camp is approximately 15 miles from downtown Montrose. From Montrose take Highway 90 west (starting at the intersection of Townsend Avenue and Main Street also known as intersection of State Highway 50, 550 and 90). Follow 90 West to County Road 6250 “Dave Wood Road” and turn left. Mountaintop Retreat is about 11 miles from that intersection. Turn left at the camp sign on Bible Camp Road. Mountaintop Retreat is the first driveway on your right. If you reach the Uncompahgre National Forest, you went one road too far.

KIDS CAMP INFORMATION: Kids Camp is a fun filled weekend (Friday- Saturday) where kids ages 6-8 and their parent/s will get to experience one night at camp! You and your child will participate in exciting worship, sing fun songs, do a craft, see a skit by the campfire, make smores, make friends, eat our amazing camp food, sleep in the dorms (just like the teen campers!), and hear a really fun speaker! This is a great way for young campers to see if camp is right for them and shake off any homesickness in the process. Plus, the parent/guardians get an inside look into what camp is like. A parent or guardian is required.

CHECK-IN: For Teens 1 pm—3 pm Monday, **CHECK-IN:** For Junior Highs 1 pm—3 pm Monday, **CHECK-IN:** For Juniors 1 pm—3 pm Monday, **CHECK-IN:** For Kids 10 am—11 am Friday

CHECK-OUT: For Teens- Thursday at 2 pm **CHECK-OUT:** For Junior High- Thursday at 2 pm **CHECK-OUT:** For Juniors- Thursday 2 pm **CHECK-OUT:** For Kids- Saturday 3 pm.

WHAT TO BRING: A warm sleeping bag or appropriate bedding, a pillow, a warm coat for cool evenings, shirts or T-shirts (no belly shirts please, shirts and t-shirts should overlap top of pants when sitting down), casual jeans, shoes for hiking, a water bottle, and ONLY modest shorts and T-shirts are to be worn for the water slide and game time, no revealing swimwear. Also, bring a Bible, a pen or pencil, a notebook, a flashlight, and personal hygiene products such as a toothbrush, soap, a towel, shampoo, etc. **Hands and Feet Ministries and Mountaintop Retreat are not responsible for lost or broken items. Please mark all personal belongings with the camper’s name.**

NOTE: All medications must be in the original labeled container along with the child’s name and dosage instructions.

WHAT NOT TO BRING: Food, candy, cell phones, radios, music playing devices, electronic games, squirt guns, knives, etc., matches, fireworks, chewing tobacco or other tobacco products. Smoking/Vaping is not permitted on camp property.

SPENDING MONEY: Pop, Candy, T-shirts and other items may be purchased at the Camp Store. Costs range from \$0.25 to \$20.00. An offering will be taken on the last day as a donation for the speakers. In order to avoid lost or stolen money, we expect the campers to place their money in an account at registration. Remaining money may be withdrawn after breakfast on the morning of departure.

NOTICE:

In case of an emergency call the director of Hands and Feet Ministries at (970)316-1909. **Note:** The camp location is on the fringe of cell phone reception and you may not get through. Please leave a message or send a text and we will return your call.

If children bring items that we have asked them not to, we reserve the right to confiscate the banned items and hold them in safe keeping until checkout time.