

T Shirt Size: _____ Age _____

Čhaňkú Wašté Ranch 2024 Camp Registration Form

PARTICIPANT INFORMATION - ALL INFORMATION MUST BE COMPLETED.

Last Name _____ First Name _____ Date of Birth _____

Address _____ City _____ State _____ Zip Code _____

Phone Number _____ E-mail _____

Emergency Contact _____ Emergency Contact Number _____

Emergency Contact _____ Emergency Contact Number _____

PARENT/GUARDIAN INFORMATION

Last Name _____ First Name _____ E-mail _____

MANDATORY: Cell number _____ Work/Home number _____

HEALTH INFORMATION

The information you provide here will be held in the strictest confidence. It will be kept on file in our health binder or carried by the camp director.

Child's Doctor's Name: _____ Phone Number: _____

Allergies: Yes No

If yes, please describe the severity of the reaction, requested accommodations, and what is done to manage them. _____

Medical, Physical, or Emotional Conditions (including Disabilities):

If your child does have any conditions, please provide information to assist us in providing the best camp experience for your child: _____

Medications (including Inhalers): Yes No

If your child must take medication while at camp, please note this here. All medications must be in their original containers and be appropriately labeled. Please do not give your camper's medication to them to bring to camp; medications must be received and held by the camp office or the camp director.

PLEASE COMPLETE THE REVERSE SIDE OF THE FORM

INSURANCE INFORMATION

Is the participant covered by family medical/hospital insurance other than IHS? Yes No

Carrier or Plan Name: _____

Group #: _____

AUTHORIZATION OF CONSENT

(I) (We), the undersigned parent(s)/guardian(s) of _____, a minor, do hereby authorize any hospital for the undersigned to consent to seek medical treatment for my child.

Signature of Parent/Guardian of Minor

Date

INFORMED CONSENT AGREEMENT

To the extent allowed by law, I, the undersigned, am the parent/guardian of the individual(s) named below and shall hold harmless, indemnify, and defend the Čhaŋkú Wašté Ranch, and the officers, employees, volunteers, and agents of each of them from and against any and all liability, loss, damage, expense, cost of every nature, and causes of actions arising out of or in connection with any negligence in the performance of this agreement. It is further understood and agreed that this waiver, release, and assumption of risk be binding on my heirs and assigns. I also release the Čhaŋkú Wašté Ranch of liability for any claims that may arise out of the activity. The Čhaŋkú Wašté Ranch also reserves the right to remove participants from the program if they present a threat to the children or if they abuse the privilege of the mission statement of the Čhaŋkú Wašté Ranch. I also understand that participation in the program can cause severe injury or death. I have taken care to enroll at the level of his/her/my/our physical abilities and/or medical conditions. I hereby grant permission to the Čhaŋkú Wašté Ranch to take my child’s photo while participating in the activities and some cases, may use them publicly. The above-named child has my permission to participate in all camp field trips during the 2024 year, as approved by the Camp Directors. I agree to release the Čhaŋkú Wašté Ranch and its representatives from any claim for personal injury or damages resulting from my child’s participation in field trip activities. I understand the activity and give my permission for my child’s participation. I permit my child to travel by means of camp transportation. One parent/guardian must sign for all minors.

I also understand that Čhaŋkú Wašté Ranch has a **NO ELECTRONICS** policy. This means your child is not allowed to bring cell phones, iPods, handheld game systems, mp3 players, CD players, and anything else electronic that has not been explicitly mentioned. If your child brings an electronic device to camp, it will be taken up, stored in a secure area, and returned to the camper at the end of the day. Having a NO ELECTRONICS policy not only ensures that your child’s electronics are not damaged, lost, or stolen while at camp but also allows them to “unplug” long enough to enjoy the beauty of the Badlands and not distract from all that camp has to offer.

I have read this entire Informed Consent Agreement. I fully understand it, and I agree to be legally bound by it.

Signature of Parent/Guardian of Minor

Date

Participants Signature