

## **Highland Lakes Camp & Conference Center**

### A Ministry of the Baptist Churches of Central Texas

5902 Pace Bend Road North \* Spicewood, TX 78669
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# ADULT

### **MEDICAL RELEASE FORM**

TODAY'S DATE:/	/							
Adult's Name:			usad)					
Mailing Address:		Last (illulcate i	iairie (	15 <del>6</del> 0)				
	reet Addr / Apt #		(	City		State	Zip	
Birth Date:/	/	Age:		Sex: (N	1/F)			
Month Day	Year							
Home Phone: Daytime (	)	Evening (	)_	Oth	er ()			
E-mail:								
Name of Church or Group wit	h whom you are atten	ıding:		c	ity:		State:	
Occupation:		Employer:				City:		
MEDICAL INFORMATION In the event of an accident or spe Please make certain that you have	cial health needs, it will				ed informatior	ı.		
Medications you take for current medical condition (asthma, allergies, etc.)				Health Information: Do you have, or have you had:				
Medications you take occasionally (headaches, etc.)				Recent Serious Injury? ☐ YES ☐ NO Recent Surgery? ☐ YES ☐ NO				
				Chronic Medical Co		ES□ NO		
Do you plan to bring these or ar	y other medications to o	camp with you?		Other Health Concerns? ☐ YES ☐ NO				
YES NO				If YES to any of the above, please describe:				
All medications must be brou	ght in the original bott	le (prescription o	r					
over-the counter), properly labeled as prescribed by law.				Special Diet?				
				Date of last Tetanus				
				Allergies: Food? Insect Stings/Bites?				
	_			macet ounga/bites:				
Person to Notify in Event of Emergency:				Relationship to You:				
Phone Number of Contact Pe	rson: Daytime (	)	Ev	ening ()		_ Other (	)	
	Area C	Code		Area Code		Area	Code	
Family Physician:				Phone: (	)			
Medical Insurance Co.:			Plan or Group #:					
Insured ID or Member #:				Ins. Co. Phone #: ()				
ADIII T	AGREEMENT			PASTOR STAFF	GROUP	DIRECTOR S	TATEMENT	
I,, acknowledge the above				PASTOR, STAFF, GROUP DIRECTOR STATEMENT (State Law Requirement)				
information is correct to the best of my knowledge.				The person above is known by me, and to my knowledge,				
Furthermore, I give permission for Highland Lakes Baptist			this person has not been convicted of any crimes					
Encampment staff to provide and authorize any medical				committed against minors in his/her background. I assume				
treatment necessary.				full responsibility for this person serving as a camp counselor working with minors.				
Signature		Date	Sign	ature of Pastor, Staff,	or Group Dir.	Phone	Date	

#### AGREEMENT TO ATTEND, PARTICIPATE, ASSUMPTION OF RISK AND RELEASE OF LIABILITY

HIGHLAND LAKES BAPTIST ENCAMPMENT *d/b/a* HIGHLAND LAKES CAMP & CONFERENCE CENTER hereinafter referred to as the "Camp" requires a signature for all attendees of the Camp and all participants of any Camp activity including, but not limited to, Challenge/Ropes Course (highs and lows), Water Crafts, Water Toys, Swimming Pool, Bicycle Course, Backpacking, Camping, Basketball, Football, Baseball, Softball, Volleyball, and any and all other camp and recreational sports and activities. Furthermore this form releases the Camp to photograph and/or use photographs of myself for use in its publications, advertising, promotional purposes, internet, and/or visual presentations which inform people of the services and activities of Camp. The signature provided confirms Agreement to Attend, Participate, Assumption of Risk, and Release Form in order to attend Camp and to participate in any Camp activity.

Attendance and Activities at Camp may include warms-ups, games, group initiative problems, high and low challenge course, and/or other rigorous physical adventure activities as well as exposure to the elements, exposure to animals, snakes and insects. Camp takes all reasonable precautions to ensure you a safe and enjoyable experience. Parts of the experience, by their nature, can be physically demanding and include varying levels of stress and anxiety, not all of which can be foreseen. The decision to attend the Camp and the decision to participate in any Camp activity at any level IS AT ALL TIMES COMPLETELY UP TO THE INDIVIDUAL'S CHOICE and, if there is attendance at the Camp and participation at any level of any Camp activity, there is a risk, which must be assumed by each attendee and by each participant. Although it is the Camp's goal to maintain the physical, emotional and social safety of each attendee and participant of the Camp, the physical, emotional and social risks must be assumed by each attendee and participant.

"I understand that attendance at the Camp and participation in any Camp activity may be physically and emotionally demanding. I recognize the inherent risk of physical and/or emotional injury of attending Camp and participating in any and/or all Camp activities. I understand that each participant must assume the risk of any injury, physical and/or emotional, and any financial responsibility that could result from attending Camp and participating in any Camp Activity. I agree to assume such risks and such responsibility. I, on my behalf, and on behalf of my heirs and assigns, hereby release, indemnify and hold harmless Highland Lakes Encampment d/b/a Highland Lake Camp and Conference Center from any and all claims, physical and emotional, including bodily injury, that I may have that may be sustained in connection with my attending Camp and with my participation in any and/or all Camp activities."

If you feel that there are any activities in which you should not be involved in, please describe for us on an attached sheet the activities (include name and church/group name in the attached sheet). I understand the directors of Highland Lakes Encampment reserve the right to dismiss, without refund, any camper whose influence is detrimental to the operation of the camp, as determined by the discretion of the directors. I understand that the use of alcohol, tobacco products, and illegal drugs is strictly prohibited at all Highland Lakes Encampment programs.

and voluntarily signed this document."	,	inderstand the information contained herein. I have nee	ıy
Signature of Attendee/Participant		_	
-	Date:	_	

#### **HLCCC POLICIES**

- 1. Prank supplies are not allowed (i.e. Shaving cream, water balloons, water guns/blasters) in the buildings. Please request HL approval for use of these supplies outdoors.
- 2. Adult supervision is required at the lake and/or pool. At no time is a student to go to the lake and/or pool without adult supervision.
- 3. Drugs, alcohol, any form of tobacco, firearms, knives, or any other kind of weapon, or fireworks are NOT allowed.
- 4. Appropriate godly dress attire is expected. Casual clothing is acceptable during all activities. Shorts (for boys and girls), skirts and skorts (for girls) should be no shorter than fingertip length. One piece modest swimsuits are requested. Swimsuits should only be worn at the swimming pool and/or lakefront.
- 5. Please refrain from Public Display of Affection (PDA) with girlfriends/boyfriends.
- 6. Please refrain from fighting.
- 7. All snack items must be stored in sealable containers to prevent ants and other insects in the dorms and meeting rooms. Texas Department of Health regulations prohibit cooking in dorms or meeting rooms.
- 8. Guests are not allowed to bring pets on campus. No pets in the dorms, motels, or meeting rooms.
- 9. Students are to respect all adult leaders and follow their instructions.
- 10. Adults ONLY should bring a cell phone. Please do not use it while at the lakefront. We want to ensure attention is placed on the students for safety reasons.