



P.O. Box 728
Upland, CA 91785
855-888-8660

REGISTRATION FORM

CAMPER INFORMATION

Please complete one form per camper

Child's Name _____ Age _____ D.O.B. _____

Address _____ City _____ State _____ Zip _____

Unplugged Camp Dates: _____ Grade (grade in Fall) _____

Preferred Cabin Mates (if any, every attempt is made but no guarantee) _____

Anything you would like us to know about your child: _____

Sex: (circle) M F T shirt size: (circle) CS CM CL AS AM AL AXL

Parent/Guardian Name: _____

Address _____ City _____ State _____ Zip _____

Email _____ Home Phone _____

Day Time Phone _____ Cell Phone _____

Union Affiliation (if applicable, Name & Local): _____

Parent/Guardian Name: _____

Address _____ City _____ State _____ Zip _____

Email _____ Home Phone _____

Day Time Phone _____ Cell Phone _____

Child Resides with: (circle) Mother Father Both Other _____

EMERGENCY CONTACTS

In the event of illness or injury and if unable to contact person(s) above, please contact:

Emergency Contact: _____

Address _____ City _____ State _____ Zip _____

Day Time Phone _____ Cell Phone _____

Emergency Contact: _____

Address _____ City _____ State _____ Zip _____

Day Time Phone _____ Cell Phone _____

Name s of other person(s) other than Parent/Guardian listed above that are authorized to pick up or sign camper out:

Name _____ Relationship _____

Name _____ Relationship _____

Photography/videography Policy: I give Youth Helpers Inc., Laurel Pines and all its affiliates' permission to photograph and or videotape my child(ren) and use their likeness in promotions, advertising social media, etc without compensation. Initial _____

Transportation: I give permission for my child to ride a bus to and from camp coordinated through Youth Helpers Initial _____

Liability Waiver: I have requested Youth Helpers to allow my child to participate in any and all activities that may include but are not limited to those outlined in the camp brochure. As a condition of receiving this benefit, I do hereby agree to the following: I understand that my child's participation in these activities can expose him/her to dangers both from known and unanticipated risks. Acknowledging that such risks exist, I on behalf of myself, my child and any other party who may have the right to assert any rights for or on behalf of my child, do hereby forever release and discharge, indemnify and hold harmless Youth Helpers Inc., Laurel Pines, its affiliates, officers, directors, agents, employees, insurers, successors in interest, attorneys, or any other person or persons associated with any or all of them who might be liable (the "Released Parties") from and against any and all claims, causes of action, actions, suits, demands, losses, damages, expenses, costs or liability (collectively, "Losses") arising from or in connection with my child's participation in Youth Helpers camp and its activities, including Losses arising from the negligence of any of the Released Parties, whether such Losses arise in connection with bodily injury (including death), property damage or otherwise (collectively, the "Released Claims"). The Released Claims include Losses arising out of any condition of the premises at which the camp activities are held or the conduct of any person in connection with the preparation for, supervision of, or conduct of any activity, whether planned or unplanned. In the event that child abuse is reported while your camper is at Youth Helpers camp, we may fully cooperate with Child Protective Services and Law Enforcement for the best interest of the child.

I further understand and acknowledge that I make this release in full accord and satisfaction of and in compromise of any and all Released Claims. I represent and acknowledge that I have read and understand this form and the release granted above and warrant that all statements made herein are true to the best of my knowledge. I have read and understand this entire form and by signing below agree to the terms herein.

PARENT SIGNATURE

Parent/Guardian Signature: _____ Date: _____