



# Permission/Waiver Form for The Salvation Army Residential Camps

Name of Camper/Volunteer \_\_\_\_\_

Parent(s) and/or legal guardian(s) of child participant \_\_\_\_\_

Address \_\_\_\_\_  
Street address City State Zip

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Age of Child (at camp) \_\_\_\_\_ Birth Date \_\_\_\_\_ Academic Grade \_\_\_\_\_

School \_\_\_\_\_

## ***Activity Responsibility Agreement***

I, the undersigned, understand that there are risks and dangers inherent in participating in The Salvation Army Residential Camp, hereinafter "Activity", which may include transportation, for a time period of up to one year. I also understand that in order to be allowed to participate in this Activity and associated Activities, I must agree not to hold The Salvation Army liable for any injury or damage which I may suffer while participating in any Activity or going to/from any Activity.

Knowing this, and in consideration of being permitted to voluntarily participate in any Activity, and recognizing the charitable nature of The Salvation Army, I hereby voluntarily release The Salvation Army from any and all liability resulting from or arising in any manner whatsoever out of any participation in any Activity.

- I understand and agree that I am releasing not only The Salvation Army, but also its officers, agents, and employees. I understand and agree that this waiver/release will have the effect of releasing, discharging, saving and forever relinquishing any and all actions or causes of action that I may have or have had, whether past, present, or future; whether known or unknown, and whether anticipated or unanticipated by me, whether through acts or omissions by The Salvation Army's personnel or other unrelated third parties or other participants.
- I understand and agree that this waiver/release will be binding on me, my spouse, my heirs, my personal representatives, my assignees, my children, and any guardian ad litem for said children.
- I understand and agree that by signing this waiver/release, I am assuming full responsibility for any and all risk of death or personal injury or property damage suffered by me while participating in any Activity, including but not limited to health care expenses.
- I understand and agree that by signing this waiver/release, I am agreeing to release, indemnify and hold The Salvation Army, its officers, agents or employees harmless from any and all liability or costs, including attorney's fees, associated with or arising from my participation in any Activity.
- I understand and agree that I am signing this waiver/release on behalf of my minor child, which I will be giving up the same rights for said minor as I would be giving up if I had signed this document of my own behalf.
- I UNDERSTAND THAT THIS IS A LEGAL DOCUMENT.  
I acknowledge that I have read this waiver/release agreement and that I understand the words and language in it. I understand there are potential dangers incidental to participating in any activity and going to/from any activity. I execute it voluntarily and with full knowledge of its meaning and significance.

## ***Consent to Publication by The Salvation Army (Photography, Film, Text, Audio)***

- I hereby irrevocably grant to The Salvation Army, its successors and assigns, its agents and those by whom it is commissioned, the absolute, unrestricted and unlimited license, right, permission, and consent to use and reuse, disseminate, copyright, print, reproduce, publish and republish, for any and all trade purposes or commercial or other advertising or public purposes, and in any and all advertising, publicity, display, publication or media, my name (or my child's name), signature and likeness, and any portraits, pictures, photographic prints or other representations of me (or my child), or in which I (or my child) may appear, or any reproductions or sketches thereof or parts thereof, photographic or otherwise, with such additions, deletions, alterations or changes therein as you in your discretion may make, either separately or together with my (or my child's) name or a fictitious name, or the name of another person, with or without any statements or testimonials made by me (or my child), or authorized by me which you may, in your discretion, prepare for use in connection therewith. I warrant that I have not limited or restricted the use of my (or my child's) name or photograph to the use of any organization or person.
- I hereby grant unrestricted use of audio tracks or text by The Salvation Army for such purposes as The Salvation Army may deem appropriate.
- I hereby release and discharge The Salvation Army, its successors, assigns and agents from any and all claims and demands arising out of or in connection with the use of any of the foregoing, including any claims for defamation, invasion of privacy or violation of any statutory right.
- I understand that The Salvation Army is not responsible for private individuals placing photos on Facebook or other such media.

Camper's Name _____ Corps/Service Center _____
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***Permission to travel to, attend and take part in activities at The Salvation Army Residential Camp***

I understand that the child named above will be attending The Salvation Army's Residential Camp from \_\_\_\_\_ until \_\_\_\_\_ (List dates attending) I understand that during this period my child/ward or I, if I am an adult participant, may take part in activities such as swimming, boating, hiking, bicycling, indoor & outdoor games and other activities consistent with the purposes of the unit/program.

***First Aid and Emergency Medical Treatment***

Please complete and return, along with this Permission/Waiver Form, the **CAMPER INFORMATION & HEALTH HISTORY FORM & CAMPER MEDICAL EXAMINATION & RECOMMENDATION**

***Camper's Agreement***

- I understand that in order to have a fun and happy time at The Salvation Army Residential Camp, I must be on my best behavior. This means that I will show respect for my counselor and teachers, and I will cooperate with instructions that they give me. I will also treat other campers with kindness and respect.
- I understand that my cabin will be my "home" while I am at camp, and the people in it will be my "family." My counselor will be like my "parent" for the week, and I will obey her/him, and I can come to her/him with any problems that I have. I will show respect to others in my cabin by being kind and considerate of them and of their belongings. I will take good care of my cabin by helping keep it clean and neat, including the care of my own belongings.
- In my groups and activities, I will be a good sport by showing kindness to other campers. I will listen to, cooperate with and show respect to my teachers and show a positive attitude.
- I promise to do all that I can to enjoy camp and HAVE FUN while I am there, and to do what I can to help others to have a FUN time, too!

Camper's Signature \_\_\_\_\_ Date \_\_\_\_\_

***Parent's Agreement***

I have discussed the importance of good camper behavior with my child. I understand that the camp staff will work to help resolve any difficulties in behavior, but that irresolvable behavior problems or behavior that threatens the safety or well-being of other campers will result in a child being brought home by Salvation Army staff. If my child is asked to leave camp early due to irresolvable behavior problems, it may be necessary for me to pick up my child from camp if other transportation arrangements with local Salvation Army staff cannot be made.

***Authorization by adult or relating to a minor or individual under local guardianship***

\*\*\*\*\* FOR ADULTS AGE 18 OR OLDER:

I certify that I am at least 18 years of age, my birth date being \_\_\_\_\_ 19 \_\_\_\_\_, and having the right to contract in my own name and to the extent herein set forth.

\_\_\_\_\_  
Printed name of adult staff member      Signature      Date

\*\*\*\*\* ON BEHALF OF CAMPERS UNDER AGE 18:

I hereby certify that I am the parent/ legal guardian of a minor child or dependent (child's name) \_\_\_\_\_, and have executed this release on his/her behalf.

\_\_\_\_\_  
Printed name of parent/guardian      Signature      Date

\_\_\_\_\_  
Address of parent/guardian

\_\_\_\_\_  
Witness Signature      Date

\_\_\_\_\_  
Witness's Printed Name