

PLEASE READ PRIOR TO REGISTERING - CAMPER/GUARDIAN PERMISSION FORM



Initials *(please initial agreement)*

In case of emergency, I understand every effort will be made to contact me. In the event that I cannot be reached in an emergency situation, I hereby give permission to licensed emergency and health care personnel to provide treatment, services and transport necessary to maintain the health of my participant. In the event medication, medical advice, treatment and/or equipment are required, I agree to accept financial responsibility for fees in excess of provincial and or private medical insurance. I agree that the camper information may be disclosed to such emergency and health care personnel. In the event of illness, accident, emergency, or any other circumstance requiring medical treatment, such treatment may be procured for the participant without legal or financial obligation to Camp Amasa and One Hope Canada. All known health issues of my participant have been stated to the camp. I will notify the camp if my participant is exposed to any infectious diseases prior to arriving at camp.

I agree to allow photographs or video of camp activities, which may include my participant, to be used in any and all camp promotional material including the sharing of photographs and videos with ministry partners of One Hope Canada.

I have read and understood the terms of this agreement and BY ALLOWING MY CAMP(ERS) to participate in the camp, I am voluntarily agreeing to abide by these terms. I confirm that the participant is physically and mentally able to participate in all activities of the camp, unless specifically indicated otherwise in writing.

Camp Amasa reserves the right to request any participant to withdraw from their camp if the participant is not acting in an appropriate and responsible manner.

Camp Amasa reserves the right to cancel any week of camp and give a 100% refund minus the deposit.

I agree to allow Camp Amasa to share my name, address & phone number with personnel & churches that are currently affiliated with the camp.

We count it a privilege that you are sending your camper to spend the time with us at camp this year. During camp, we look forward to many great friendships being formed! We have an amazing missionary team, and they love to stay connected with their campers throughout the year to hear how they are doing and answer any questions they may have about the topics discussed during chapel sessions and cabin devotionals. As part of our camper protection policy (www.insafehands.ca) we are committed to honouring you as a parent/guardian and to asking your permission before any contact occurs between campers and our missionaries (*Faith Spark App, birthday & camp postcards, registration flyers, and camp newsletters, phone calls, etc.*). Our missionaries would be honoured to be able to continue to stay involved in your participant's life after camp. Please indicate whether or not you give permission to our missionaries to stay in contact with your camper. If you wish to discuss this further, please contact the camp director by phone or email (please see camp website for contact information). If you wish to withdraw your permission, please contact the camp office immediately to notify the camp director.

Campers Name: _____

Parent/Guardian Signature: _____ or Campers Signature _____

Date: _____

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