

Mt. Sinai Congregational, United Church of Christ
233 North Country Road, Mt. Sinai NY 11766
Youth Retreat Registration and Waiver

What: 7th through 12th Grade Retreat
When: April 28 and 29, 2012
10am start time at Camp- end time on Sunday around 11am
Where: Camp DeWolfe,- 408 North Side Road Wading River, NY 11792-1111
Cost: Total amount- \$65 (non refundable deposit due by Jan 5th of \$35) the entire amount is due by March 25th.
If the cost is a hardship please speak to Rev. Diane or Mary Larson. There are some partial scholarships available.

Please fill out all information requested below (one per youth):

Registration/Emergency Medical Information

Participant Information:

Name: _____
Date of Birth: _____
Address: _____ City: _____
St: _____ Zip: _____ Home Phone: () _____ email address: _____
Please list any medical conditions, injuries, or allergies:

In Case of Emergency Contact:

Name: _____ Evening Phone: (Relationship) _____
Cell: _____

Medical Release: In the event of an emergency, I authorize the administration of any first aid, transport, examination, diagnosis, and/or treatment that is deemed necessary by Mt. Sinai Congregational, UCC Church or any paramedic, nurse, physician, or dentist.

Participant's Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

(**REQUIRED** if participant is under 18 **OR** is covered by parent's insurance)

DISCLOSURE AND ACKNOWLEDGEMENT OF RISK

- The program activities are designed to be within the capability of anyone who is in reasonably good health.
- Prospective participants who are not in good health, who have pre-existing medical conditions, or who have questions about their current state of health should consult with their physician before participating.
- The undersigned covenants that he or she will not sue Mt. Sinai Congregational, UCC Church or otherwise pursue any claims for any risks or injuries identified in this document or otherwise arising out of the programs. The undersigned agrees to indemnify Mt. Sinai Congregational, UCC Church, provide a defense, against any and all claims for any risks or injury arising out of, or in connection with, the programs.

Media Consent: I give my consent and permission for the taking of photographs and/or video of my child during the described programming and I waive and/or assign all rights (including copyright) in such media to Mt. Sinai Congregational, UCC. Mt. Sinai Congregational, UCC, as the sole owners of such media, shall have the exclusive right to control and determine the use, display, performance, reproduction and dissemination of any such photographs and/or videos.

Participant's Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

(Required if participant is under 18)