

PARENT/GUARDIAN SIGNATURE FORMS FOR CAMP OO-U-LA 2022

I. PARENT/GUARDIAN INFORMATION

I, _____ (print your name), certify that I am the legal parent and /or guardian of _____ (print your child's name), and that all of the information given on the application is correct and true. I also understand that while my child attends the Georgia Firefighters Burn Foundation, Inc.'s camp programs, I am responsible for letting the GFBF know how to reach me in an emergency. If there is an emergency, or if it becomes necessary for my child to be removed from camp because of unacceptable behavior, and I or any of the other emergency contacts I have listed cannot be reached the Georgia Firefighters Burn Foundation, Inc. may call Law Enforcement and/or the Department of Family and Children Services. Furthermore, I consent for my child to participate in the activities at camp. I understand that reasonable measures will be taken to safeguard the health and safety of all participants and that I will be notified as soon as possible in the event of an emergency. I also understand that the Georgia Firefighters Burn Foundation, Inc. is not responsible or liable for the loss of any personal belongings or property.

Parent/Guardian Initials _____

II. TREATMENT AUTHORIZATION

I hereby testify that the health history provided on the camper application is correct to the best of my knowledge and that the person described above has permission to engage in all prescribed camp activities except as noted.

I agree that the Georgia Firefighters Burn Foundation Inc.'s camp program medical staff and/or their authorized agents may administer over-the-counter medications (or generic equivalents) and/or prescription medications (as advised by a physician) if deemed medically necessary. This includes, but is not limited to: aspirin, ibuprofen, Tylenol, Neosporin, sun block, sting ointment, insect repellent, Blistex and Visine.

I also understand that reasonable measures will be taken to safeguard the health and safety of all participants at all times, and that I will be notified as soon as possible in case of any emergency affecting my child.

In the event of a medical or surgical emergency I give permission for the GFBF camp program medical staff or their authorized agents to obtain emergency medical or surgical treatment for my child (this may include, but may not be limited to transportation, x-rays, routine tests and other necessary treatments) and I hereby release the GFBF camp program medical staff and their authorized agents from any liability for doing so or failing to do so. I have read and fully understand the medical direction and consent and release of liability printed above.

Parent/Guardian Initials _____

III. AUTHORIZATION FOR RELEASE OF PATIENT INFORMATION

The safety and well-being of every camper is an important concern of the Georgia Firefighters Burn Foundation, Inc.'s camp programs. At times, it may become necessary for camp staff, such as the director or nurse, to acquire further medical history or consultation from a camper's health care provider. Medical personnel and practitioners need patient authorization to release any patient's personal and/or medical information. Every effort will be made to contact the camper's family first but if contact with a health care provider is made, we will advise the family. **This authorization is valid from June 5, 2022, until the end of the camp program on June 10, 2022.**

I hereby authorize _____ (Please list name of camper's primary physician and/or other health care providers) to release to the Georgia Firefighters Burn Foundation, Inc.'s camp program medical staff any personal or medical history/information to facilitate/assist treat of

_____ (Camper's Name).

Parent/Guardian Signature

Date

WAIVER OF CLAIMS AND INDEMNITY FOR GEORGIA FIREFIGHTERS BURN FOUNDATION, INC.

THE GEORGIA FIREFIGHTERS BURN FOUNDATION, INC. WAIVER OF CLAIMS AND INDEMNITY

Name of Camper: _____

Name of Parent or Guardian: _____

Relationship to Camper: _____

For and in consideration of the Participant being permitted to attend and participate in the Georgia Firefighters Burn Foundation, Inc.'s camp programs (hereinafter collectively referred to as "GFBF"), the Participant, and in the case of the Participant who is a minor, his or her parent and/or legal guardian in his or her personal capacity and on behalf of the Participant:

(a) hereby acknowledges that the Participant's attendance at GFBF camp programs, inclusive of his or her travel to and from GFBF camp programs and his or her participation in all activities and events associated with GFBF camp programs (hereinafter collectively referred to as "Attendance at Camp") may expose the Participant to inherent risks, dangers and hazards and the possibility of injury to property or person;

(b) declares that the Participant shall assume all risks with respect to his or her Attendance at Camp, even if such risks arise from the breach of any statutory or other duty of care or negligence of the GFBF and its officers, directors, members, volunteers, partners, associates, employees, agents, successors and assigns;

(c) acknowledges that the GFBF shall not be responsible for any injury to the Participant, including death or any loss or injury to property or person, suffered by the Participant at any time as a result of the Participant's Attendance at Camp, whether such injury is foreseeable or not including those arising from the breach of any statutory or other duty of care or negligence of the GFBF; and

(d) agrees not to commence proceedings against the GFBF with respect to any and all claims, actions, causes of action, damages, debts and demands, in law or equity, including those arising from negligence or the breach of any statutory or other duty of care, and whether actual, potential, known or unknown, anticipated or potential, which the Participant now has or shall have on account of, in relation to, based on, or connected with the Participant's Attendance at Camp, and

(e) agrees to indemnify and save and hold harmless the GFBF and its officers, directors, members, volunteers, partners, associates, employees, agents, successors and assigns from any and all claims, actions, causes of action, damages, debts and demands, in law or equity, including those arising from negligence or the breach of any statutory or other duty of care, and whether actual, potential, known or unknown, anticipated or potential, arising from or in relation to, based on, or connected to the Participant's Attendance at Camp including, claims, actions, causes of action, damages, debts and demands, in law or equity, including those arising from negligence or the breach of any statutory or other duty of care, and whether actual, potential, known or unknown anticipated or potential, arising from or in relation to based on or connected to the Participant's Attendance at Camp, including his or her travel to and from GFBF camp programs.

The undersigned agrees that if any portion of this document is held to be invalid, that the balance of the document shall, notwithstanding, continue in full legal force and effect. The undersigned agrees that this document be governed by and interpreted in accordance with the laws of Georgia. The undersigned confirms that he or she has read and understood the terms of this document and agrees to be bound thereby. The undersigned further acknowledges that he or she has had the opportunity to receive legal advice before signing this document and that he or she had signed this document freely and voluntarily and without any duress or undue influence on the part of any person.

Parent/Guardian Name

Parent/Guardian's Signature

Date

CAMP TWIN LAKES CAMP RELEASE FORM

This agreement must be read and signed for you/your child to be eligible to attend Georgia Firefighters Burn Foundation Inc. programming at Camp Twin Lakes.

Your Child's Name: _____

I. PARTICIPATION CONSENT

I understand and certify that my/my child's participation in the Georgia Firefighters Burn Foundation Inc. (GFBF) and its activities at Camp Twin Lakes is completely voluntary. I have familiarized myself with the Georgia Firefighters Burn Foundation Inc. (GFBF) program and activities at Camp Twin Lakes in which I/my child will be participating. I recognize that certain hazards and dangers are inherent in these activities, which may include, but not limited to, the activities of horseback riding, high and low elements ropes course, swimming, archery, gardening, cooking, biking, sports, lake swimming, and boating. I acknowledge that although Georgia Firefighters Burn Foundation Inc. (GFBF) and Camp Twin Lakes have taken safety measures to minimize the risk of injury to camp participants, Georgia Firefighters Burn Foundation Inc. (GFBF) and Camp Twin Lakes cannot insure or guarantee that the participants, equipment, premises, or activities will be free of hazards, accidents or injuries. I recognize and have instructed my child in the importance of knowing and abiding by the rules, regulations, and procedures for the Georgia Firefighters Burn Foundation Inc. (GFBF) program at Camp Twin Lakes. Further, I attest that my health insurance will cover any medical and hospital expenses that I/my child incur and I have received approval from a doctor authorizing me/my child to participate in Georgia Firefighters Burn Foundation Inc. (GFBF) activities at Camp Twin Lakes. I also agree to inform Georgia Firefighters Burn Foundation Inc. (GFBF) of any activities in which I/my child may not participate. I understand and agree that my child will be in an environment that involves elements related to nature, camping or community living, such as insects and insect bites, sun exposure, or communicable illnesses including, but not limited to COVID19.

II. LIABILITY RELEASE

I, the undersigned, understand that occasionally accidents occur during camp activities and that participants may sustain serious personal injury and property damages as a consequence thereof. Knowing the risks of camp activities, nevertheless, I agree to assume those risks and by signing this liability release, I intend to legally bind myself, my minor children, my heirs, executors, and administrators. I hereby release and forever discharge Georgia Firefighters Burn Foundation Inc. (GFBF) and Camp Twin Lakes, and any of their officers, directors, employees, partners, shareholders, board members, servants, agents and assigns from and against all claims, causes of action, damages, losses and/or expenses arising out of or relating to any injury, illness, or loss of any kind, known or unknown, including but not limited to injuries to property or person, to me/my child during or related to my/my child's attendance in the Georgia Firefighters Burn Foundation Inc. (GFBF) program at Camp Twin Lakes.

III. MEDIA RELEASE

I do I do not give Georgia Firefighters Burn Foundation Inc. (GFBF) and Camp Twin Lakes the right to interview and/or to take photographs, audio or audio-visual recordings of me/my child to be used in promotional, educational or fundraising materials including, but not limited to videotapes, pamphlets and brochures. I understand my/my child's name may be used in connection with these materials. By signing this media release, I intend to legally bind myself, my minor children, my heirs, executors, and administrators. Georgia Firefighters Burn Foundation Inc. (GFBF), and Camp Twin Lakes shall have the right to use photographs or other images of me/my child in promotion, educational or fund-raising materials. I acknowledge that Georgia Firefighters Burn Foundation Inc. (GFBF) or Camp Twin Lakes shall have all rights of copyright in and to such photographs and videotapes and may use such copyright fully. I also hereby release Georgia Firefighters Burn Foundation Inc. (GFBF) and Camp Twin Lakes and its officers, agents and employees from all liability connected with the taking and use of these materials as is authorized by Georgia Firefighters Burn Foundation Inc. (GFBF) and Camp Twin Lakes. In addition, I waive all rights, interest or claims for payment in connection with any exhibition or release of these materials. This consent is voluntary, and I give it in the interest of public information, education, the furtherance of the goals of these institutions, or other lawful purposes. I acknowledge that I have legal authority to sign this form on behalf of the minor whose name is mentioned above.

IV. PROGRAM AND OUTCOMES EVALUATION

I do I do not give Georgia Firefighters Burn Foundation Inc. (GFBF) and Camp Twin Lakes permission to survey me/my child in confidential and voluntary program evaluation at Camp Twin Lakes. I understand that my/my child's name will not be used in conjunction with surveys and the data collected will be used to improve programming at Camp Twin Lakes and other camps and programs.

V. DISPUTES

I agree that any dispute concerning, relating, arising out of or referring to the subject matter of this contract shall be resolved exclusively by binding arbitration in Atlanta, Fulton County, Georgia. The arbitration shall be administered by JAMS and conducted before a single arbitrator in accordance with the JAMS Rules. The arbitrator shall have exclusive authority to resolve any dispute relating to the interpretation, applicability, enforceability, conscionability, or formation of this contract, including but not limited to any claim that all or any part of this contract is void or violable.

Parent/Guardian's Signature

Date

CAMPER BEHAVIOR AGREEMENT

GFBF Camp Program Behavior Agreement

GFBF camp programs strive to be a great experience for all involved! The focus of our entire program is on the campers. With this in mind, we have established the following agreements and expectations in an effort to assure that everyone understands them and has the safest and most enjoyable time possible. Please take a moment to review and discuss the camp agreement with your child before you both sign at the bottom.

1. Campers agree to listen to and be respectful of all camp volunteers and staff.
2. Campers agree to be respectful of other campers.
3. Campers agree they will not throw water balloons or use water guns inside the cabins.
4. Campers agree to wear appropriate clothing; **including ONE PIECE SWIMSUITS FOR FEMALES (Tankinis are acceptable if the entire mid-drift is covered) AND TRUNK STYLE SUITS FOR MALES.**
5. Campers agree to protect the camp environment.
6. Campers agree to follow the "rule of three" (never one on one with counselors, volunteers, or other campers).
7. Campers agree to take care of and return any equipment they may use.
8. Campers agree to follow the expectations set out by their cabin counselors.
9. Campers agree to follow the expectations of the Camp Twin Lakes Staff and Facility.
10. Campers agree to stay with their group or always assigned volunteer/staff, including at campfire.

The following are NOT allowed at camp:

- Cell phones, iPods, or other electronic devices.
- Physical or verbal aggression, including fighting and swearing, with volunteers, staff or other campers.
- Smoking, alcohol, weapons of any kind (i.e., sling shots, cap guns, knives, etc.), lighters/matches, fireworks and fire setting.
- Any other equipment/item that is not approved of by Children Services Director.

A camper's failure to meet this agreement will result in a systematic administration of supportive counseling and consequential actions. GFBF camp programs will utilize the **3-stage process of behavior management** outlined below as a means to ensure that all campers take the responsibility of caring for themselves, their fellow campers, volunteers/staff, and the camp environment.

- Stage 1** A warning to discontinue unacceptable behavior may be given by the cabin counselor and may result in the camper losing special privileges and/or time out.
- Stage 2** If the behavior continues or another agreement is broken, the counselors and Children Services Director will meet with the camper to discuss a plan and let the camper know what is expected and what the consequences will be if the behavior persists.
- Stage 3** If the behavior persists, the camper will be removed from all camp activities and meet with the Children Services Director. The camper's parents/guardians will be contacted by the Children Services Director and advised that the camper will be sent home if the behavior does not improve, and Children Services Director will document via an incident report.

GFBF camp programs reserve the right to remove from camp any camper whose behavior is, in the sole judgment of Children Services Director, detrimental to the best interests of the campers and adults using the camp facilities and/or the overall welfare of the camp program.

My child and I have read and understand this Behavior Agreement and realize that it will be enforced to assure the safety of all campers and the environment. Our signatures signify that we understand and agree to the consequences.

Parent/Guardian Printed Name

Signature

Date

Camper's Printed Name

Signature

Date

CONTACT INFORMATION RELEASE

**GEORGIA FIREFIGHTERS BURN FOUNDATION, INC.
CONTACT INFORMATION RELEASE**

I acknowledge that the Georgia Firefighters Burn Foundation, Inc. is not able to monitor or limit the exchange of personal contact information and/or photos in any way. I further acknowledge that any camper contact with volunteers/staff/campers outside of GFBF sponsored programs and/or events is at the sole discretion of the individual volunteer/staff/camper and the GFBF is not responsible or liable for this communication and/or contact.

I have read and accept the conditions described above.

Camper's Name	

Parent/Guardian's Signature	Date

COVID-19 REPORTING AND TESTING

In allowing my child to attend Georgia Firefighters Burn Foundation's Camp Oo-U-La program at Camp Twin Lakes, I agree, on behalf of my family and child, to report any positive COVID cases of myself, my camper, or any member of our household between the 14 days prior to the start of the camp session, during the camp session, and the 14 days following the last day of the camp session to the Georgia Firefighters Burn Foundation's Camp Director, McKenzy Williams at mwilliams@gfbf.org or 404-320-6223. I understand that by doing so, I am helping to protect my family and the families that my child contacts during the camp session.

In addition to providing consent to treat my child, I hereby agree that my child may undergo COVID testing during the camp session to identify a potential Positive COVID case or for contract tracing purposes. In any cases where my child is provided a COVID test, I will be notified of the results in a timely manner.

Camper's Name	

Parent/Guardian's Signature	Date

Please return these forms completed with signatures in
by **Friday, May 6, 2022**, to:

Georgia Firefighters Burn Foundation
ATTN: Camp Oo-U-La
2575 Chantilly Drive
Atlanta, Georgia 30324