

## Acknowledgment of Disclosure of Risk and Permission to Participate in The Christian Disciple Farm

In consideration of the opportunity afforded \_\_\_\_\_ (Child) to participate in "The Christian Disciple Farm", the undersigned, being a parent or legal guardian of the Child and in recognition of the possible danger to which the Child may be voluntarily subjected, including, but not limited to, rock wall climbing, fishing, horseback riding, hiking, adapted sports, and cooperative games, the undersigned hereby knowingly, freely, and voluntarily waive, on behalf of the Child, and the undersigned, any right or cause of action, of any kind whatsoever, arising as a result of such activity from which any liability may or could accrue and hereby authorize the participation of the Child in "The Christian Disciple Farm" Day Camp to be held Monday, August 6th – Friday, August 10, 2018 from 9:00am – 2:20pm daily.

Many of the wonderful camp experiences are photographed by family members and volunteers, along with occasional visits from local media. I understand that my child's picture may be used for publicity or publications to spread the word about The Christian Disciple Farm and/or Servant Community (the non-profit that sponsors camp) or to thank sponsors and volunteers.

I understand that my child's buddy will do his/her best to care for and meet the individual needs of my child. Should my child's behaviors or needs become a danger to him/herself, campers or to others, I will be called for advice and perhaps to pick my child up from camp. Return to camp will be at the discretion of the camp directors and child's parents.

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 case of an emergency. If an emergency were to happen, I understand that my child will be taken to Fort Atkinson Memorial Hospital or Aurora Medical Center in Oconomowoc. In the event that I cannot be reached in an emergency, I hereby authorize the calling of a physician at my expense to provide whatever medical or surgical treatment is necessary.

It is expressly understood and agreed that Servant Community, Ken and Sue Rheingans (owners of Raspberry Hill Farm-event location), or any other participating organization shall not be responsible or legally liable for any losses of personal property or for any bodily injuries, or the results thereof, incurred and suffered by my child in connection with any activities or programs associated with The Christian Disciple Farm.

\_\_\_\_\_

**Date**

\_\_\_\_\_

**Parent or Guardian's Signature**

If one or both parents are participating in camp then your signature(s) is required below stating that you have read the acknowledgement of risks and agree to the terms in regard to yourselves.

I have already filled this out on my other child's form. If so, give name of child: \_\_\_\_\_

\_\_\_\_\_

**1<sup>st</sup> Parent Signature**

\_\_\_\_\_

**2<sup>nd</sup> Parent Signature**

Does either parent attending camp have any special needs?  Yes  No Which one? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Does either parent attending camp have any allergies?  Yes  No Which one? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Does either parent attending camp have any dietary considerations?  Yes  No Which one? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Does Mom or Dad have any medical conditions we should know about?  Yes  No Which one? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

**Please return all four pages of this form with the signature at the bottom of page 3 and at least one signature on this page along with the \$30 fee for this child (plus any fees for one or both parents to participate-\$6/day per parent) to Sue Rheingans at W1008 Froelich Rd, Sullivan, WI 53178. Send forms for your entire family all at once if possible. (\$120 maximum for family)**

**Please make checks payable to: Christian Disciple Farm.** A full refund will occur if your child does not get into camp due to camp being full, registration received too late or our inability to secure a reliable buddy for your child.

Once your registration and check have been received you will get an acknowledgement postcard or email (unless received after the deadline, in which case you will be emailed or called).

**Questions? Call Sue or Ken Rheingans at (262) 593-5616**

**This form will also be available at [www.disciplefarm.com](http://www.disciplefarm.com)**