



2022 SUMMER REGISTRATION OVERNIGHT CAMP

TO REGISTER

- ♦ Online registration available at fishingforlife.org
- ♦ Mailed registrations must be accompanied with full payment. The completed registration materials, along with payment will secure your place at camp.
- ♦ Registrations accepted now throughout summer 2022.

FINANCIAL ASSISTANCE- PERSONAL PRICING PLAN

Fishing For Life welcomes all who wish to participate in our programs. Fishing For Life annually raises funds through our Annual Campaign to help make that possible. Financial Assistance is granted on a first-come, first-served basis. Please contact Vaughn Blackburn at 612-594-0551.

CONFIRMATION

- Email confirmation will be sent upon completion of on-line registration.
- Confirmations will be emailed within three weeks upon receiving mailed or faxed registrations. camper information such as packing lists and session
- The Camper Family Handbook contains important information. It can be found on the Fishing For Life website. Please review thoroughly.

ADDITIONAL CAMP PAPERWORK

- Complete your camper's information in the Emergency & Health Information Form, Camp Medication Form, and Camper Individual Care Plan found on the website.

GETTING TO CAMP

All camps registered on the Fishing For Life website will leave and return to Patriot Converting at 12698 Industrial Blvd. NW, Elk River, MN 55330. Please see specific camp information for pickup times.

All camps registered through a 3rd party site should report directly to those camps.

DROP-OFF AND PICK-UP

Specific timing for drop off and pick up of camps registered through Fishing For Life website will be available in the pre-camp emails.

CANCELLATION & CHANGE POLICY

- ♦ If cancellation is due to a camper's illness or medical reasons, or other uncontrollable circumstance, your camp fees may be refunded minus \$50.00 when cancellation is accompanied by a doctor's record/official statement.

PARTICIPATION REQUIREMENTS AND ACCESSIBILITY

Campers coming to a Fishing For Life overnight camp should be motivated and excited to experience residential summer camp, which involves working as a team, embracing physical and mental challenges, and lots of fishing, embodying our faith statement.

If your child has a disability or mental health concern requiring an accommodation, or a special need you would like us to be aware of, please let us know. This information enables us to better meet the needs of your child within available resources.

Fishing For Life reserves the right to send any camper home early who does not abide by our rules, whose behavior is disruptive, uncontrollable, illegal, dangerous, or disrespectful to other campers or the camp community. Our staff and expert guides work within the scope of their training to support all campers. We do not issue refunds for campers that leave early due to violations.

FAITH STATEMENT

We believe the Bible, both Old and New Testament, to be the inspired, infallible Word of God, without error in the original writings (manuscripts), written under the inspiration of the Holy Spirit, and the final authority for Christian faith and conduct.

We believe there is only one true and living God, eternally existing in three persons: Father, Son, and Holy Spirit, who are equal in attributes, power, and glory.

We believe in God, the Father, an infinite, personal spirit, perfect in holiness, wisdom, power, and love. We believe that He concerns Himself in the affairs of each person, hears and answers prayer, and saves from sin and death all who come to Him through Jesus Christ.

We believe in Jesus Christ, who came to earth as the incarnate Son of God, was conceived by the Holy Spirit, born of a virgin, fully God and fully man. We believe Jesus lived a sinless life while on this earth, performed miracles and taught those things given to Him by the Father, and paid the penalty for the sins of all people with His own blood, which was shed on the cross. We believe He rose from the dead and ascended to His place of glory in heaven from where He intercedes for His own and rules as Lord.

We believe in the Holy Spirit, who convicts the world of sin, lives in all people who have surrendered their life to God through faith in Jesus Christ, draws true believers closer to God and transforms their lives, gives spiritual gifts and empowerment for service and ministry, and guides and teaches God's people.

We believe all people are sinners by nature and by choice and are therefore separated from God and condemned to eternal death. We believe that those who repent of their sins, trust in Jesus Christ as Savior and commit their life to Him will have their sins forgiven and will be regenerated (reborn) by the Holy Spirit and will become children of God. We believe salvation is only available through Jesus Christ. We believe God desires all believers to demonstrate God's love and share their faith in Jesus Christ with others.

We believe the Church is the living Body of Christ, consisting of all those who have entered into a personal relationship with Jesus Christ as Savior and Lord. The Church exists to bring glory to Jesus Christ, to be a united family of faith and love, and to make Christ known to all people in the world.

We believe Jesus Christ shall return to earth someday in power and glory to establish His eternal kingdom and that at His return all people shall be judged. Those who have been reborn in Christ shall live and reign with Him forever and those who rejected Him shall suffer eternal destruction.

2022 REGISTRATION FORM

Online registration available at

Please return this completed form with parental/guardian signature to:

Fishing For Life • Phone 612-961-6833

Please use one registration per child, per session. Submissions/Questions: Laura Hudson 612-961-6833

Camper Name _____

Last

First

Middle

Preferred Name/Nickname _____ Gender/ _____

This is my _____ year at camp. Date of Birth _____ Grade in Fall 2022 _____ Ethnicity (optional) _____

1st Contact Parent/Guardian _____ 2nd Contact Parent/Guardian _____

Date of Birth _____ Date of Birth _____

Address _____ Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

Home phone _____ Home phone _____

Work phone _____ Work phone _____

Cell phone _____ Cell phone _____

Email _____ Email _____

Child resides with ☐ Mother ☐ Father ☐ Both ☐ Other _____

Mailing and Communication will be sent to 1st contact.

SESSION INFORMATION

Camp Name _____ Session Dates: _____

Camp Name _____ Session Dates: _____

Camp Name _____ Session Dates: _____

Camp Name _____ Session Dates: _____

How did you find out about this camp? _____

PAYMENT INFORMATION

A full payment per camper per session must accompany each registration form.

Scholarships are available and/or we can establish a payment plan.

☐ Check enclosed amount: \$ _____ (payable to: Fishing For Life)

☐ Please bill my: ☐ Visa ☐ MasterCard ☐ Discover ☐ Am Express

Card # _____ Exp. Date _____

Please charge: ☐ Payment in Full ☐ Other amount \$ _____

PARENTAL/GUARDIAN SIGNATURE REQUIRED

Please sign here _____

Please complete the Release Form and return with registration.

Billing information if different from 1st contact: Name _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

EMERGENCY CONTACT INFORMATION:

These individuals will be contacted if parents/guardian cannot be reached.

First Emergency Contact _____

Phone: _____

Relationship to Camper: _____

Phone type: _____

Second Emergency Contact _____

Phone: _____

Relationship to Camper: _____

Phone type: _____

Will your camper have health insurance at the time of their camp session? ☐ Yes ☐ No

Health Insurance Co.: _____

Policy/Group #: _____

Primary Insured Name: _____

Primary Insured Date of Birth: _____

Physician's Name: _____

Physician's Phone: _____

Dentist Name: _____

Dentist's Phone: _____

Are all of your campers immunizations up to date? ☐ Yes ☐ Conscientious Objector

Date of last tetanus shot (MM/DD/YY)? _____ / _____ / _____

Does your camper have any medical conditions that require special care?

Has your camper had any surgeries, illness, or injuries we should be aware of?

Does your camper have any allergies we should be aware of?

Does your camper have any dietary restrictions?

Does your camper have any camp activities from which they should be restricted for medical reasons?

Camper Personal and Social Information

We want every camper that comes to have a safe, fun, and enriching experience. We want every camper to feel at home. Is there anything you would like to share with us so we can make sure your camper's experience is spectacular?

Medications from home

Please list all medications from home, prescription or over-the-counter, that your camper will be taking at camp. All medications

must be brought to camp in their original containers, which must be placed in a sealable plastic bag with your camper's name on it.

Medication name:

Purpose

Dosing Instructions

RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

EFFECTIVE January 1, 2022

RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

In consideration of participating in Fishing For Life activities, and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence Fishing For Life (hereinafter referred to as FFL) and its owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

1. I acknowledge that participating in FFL activities involves known and unanticipated risks which could result in physical or emotional injury, illness, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, broken bones, torn ligaments or other injuries as a result of falls or contact with other participants; death as a result of drowning or brain damage caused by near drowning in pools or other bodies of water; medical conditions resulting from physical activity or exposure to infectious diseases such as COVID-19; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment and increased cleaning, sanitation and physical distancing, without jeopardizing the essential qualities of the activity.
2. I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees. My/My child's participation in these activities is purely voluntary and we elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I or my child are unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my/my child's participation in these activities, or our use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct or conduct that constitutes greater than ordinary negligence. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
4. I represent that I have adequate insurance to cover any injury, illness or damage I or my child may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury, illness or damage myself. I further represent that I/my child have no medical or physical conditions which could interfere with our safety in these activities, or else I am willing to assume – and bear the costs of – all risks that may be created, directly or indirectly, by any such condition.
5. In the event that I file a lawsuit, I agree to do so in the state where Releasees' facility is located, and I further agree that the substantive law of that state shall apply.
6. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

PARENT/GUARDIAN AUTHORIZATION SECTION — TRANSPORTATION/MEDICAL

1. In the event that I/my child need immediate medical attention for injuries or illness that may occur while participating in a FFL program, I authorize the FFL staff to give me or my child reasonable first aid, and to arrange transport of myself or my child to a health care facility for emergency services as needed. I understand that I may be asked to isolate myself or my family and may be asked to leave a program early if I display symptom of illness such as COVID-19.
2. I give permission for myself and/or my child to be transported by FFL as needed for field trips, inclement weather, or late pick up. I also give my permission to participate in field trips.
3. I also give permission for myself or my child to enter Canada with FFL. I also understand that I/my child will need to bring our passport to camp if the trip involves such travel to Canada.
4. I hereby acknowledge that FFL will assume that either parent of the child may pick up the child at any time during the program unless there is pertinent court documentation on file with FFL that indicates otherwise.
5. I agree to the release of any records necessary for treatment, referral, billing, infectious disease tracking, or insurance purposes. FFL receives medical information on campers/participants that may need to be shared with medical providers, insurance carriers, or other governmental agencies as required.
6. If I or my child requires use and administration of an epi-pen, prescription or over the counter medication, it is my responsibility to ensure that the epi-pen and/or medication are on me or my child or within our personal belongings every day of the program. If FFL staff is required to administer and use the epi-pen and/or medication, I agree to forever release and discharge FFL and its directors, officers, and employees from any and all liability arising out of or resulting from use or administration of the epi-pen and/or medication.
7. I agree to take personal responsibility for myself and my family while participating in this program. Personal responsibility may include but not be limited to; initial temperature monitoring upon arrival, self-monitoring temperatures each day, following social/physical distancing protocols, and following appropriate hand-washing, cleaning and sanitation practices as defined by FFL and for as long as this is deemed necessary for the safety and protection of all participants and FFL team members by the MDH and the CDC.

GENERAL

1. I hereby release all pictures of myself or my child taken by FFL for promotional purposes and programming materials including the FFL website.
2. I give my permission for FFL to administer sunscreen as needed while my child is in their care.
3. I acknowledge that certain sections of this waiver may not apply to me and/or my child and the programs or activities that we have chosen but agree to be bound by any applicable language.

By signing this document, I agree that if I or my child is hurt or our property is damaged during participation in these activities, then I or my child may be found by a court of law to have waived our right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if FFL did not utilize waivers as a method to lower insurance and administrative costs. I have read and understood this document and I agree to be bound by its terms.

Signature	Print Name		
Address	City	State	Zip
Telephone ()			Date

PARENT OR GUARDIAN ADDITIONAL AGREEMENT

(Must be completed for participants under the age of 18)

In consideration of _____ (PRINT minor's names) being permitted to participate in this activity, I further agree to indemnify and hold harmless Releasees from any claims alleging negligence which are brought by or on behalf of minor or are in any way connected with such participation by minor.

Parent or Guardian	Print Name	Date
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