

# India Community Centre Summer Camp Counselor

## Liability & Waiver Release Form

### Medical History

NAME:

AGE:

PHONE:

ADDRESS:

Emergency Medical Information

(If "Yes", please explain on the lines following the question.)

NO

YES

Allergies to foods, drugs, insect bites, dust, etc. Please identify them and the nature of your reaction.

NO

YES

Physical disabilities or conditions which might limit your participation:

NO

YES

If you are presently taking medication (s), please identify them:

In Case of Emergency Contact:

Name

Relationship

Home Phone

Work Phone

## **Statement of Understanding**

I am aware in signing this statement for participation in Summer Camps for the India Community Center that certain activities are physically demanding. Therefore, physical fitness will increase the enjoyment and ability to participate in the activity. If for any reason I question the ability of the participant to participate in the activity, I will consult with the instructors prior to participation.

I'm aware that I've to be at the premises or with the group that I've been assigned, for the weeks and time that I've committed to. I cannot leave the premises without prior permission or notification to the camp director except for any emergencies  
I understand that most activities are conducted in the out-of-doors in all kinds of weather, so proper dress (rain gear, warm clothing) are essential to avoid undue Exposure to known risks; however, as a counselor, I acknowledge the nature of the activity and the fact that not all of the stresses and hazards connected with the activity can be foreseen.

I have personal responsibility to follow the established safety rules and procedures to the extent that I participate in such activities. I assume full responsibility of the group of children assigned to me.

If at any time I have questions about the activity, it's my responsibility to consult with the camp director.

I recognize that there is a significant element of risk in any adventure, sport or activity associated with the outdoors.

I understand that cellphone use and texting during the camp hours is not appropriate and the camp director will have the discretion to relieve me of my duties at any point.

I understand that inappropriate language or misconduct will not be allowed during ICC camp hours.

Possession, use or distribution of an illegal or controlled substance, or look-alike drug & unauthorized and/or illegal possession, use or distribution of any alcoholic beverage is not allowed at any point of time at the India Community Center or its other locations.

Theft of property or services. Intentional or willful and wanton destruction of property.

Possession of a weapon.

Conduct which constitutes harassment or abuse that threatens the mental well-being health or safety of any individual.

Consequences include, but are not limited to, time out, notifying parents, and removal from the program for the safety and wellbeing of other campers.

Disciplinary action may also be imposed whenever a student commits any acts of misconduct during an on-site event or activity.

Signature

Date

(Parent or legal guardian must sign for all persons under 18 years of age.)