### **COVID-19 CAMPER/PARENT INFORMATION**

Please be aware that Camp Challenge is making some changes this year with the health and safety of our campers, staff, and their families in mind. Here are some highlights; a full listing of policies and practices for mitigating risk of COVID-19 infection is available upon request.

#### **BEFORE CAMP**

- Reconsider attendance this year if your camper has moderate to severe asthma or is otherwise considered highly vulnerable.
- Closely monitor your camper's overall health for 2 weeks prior to arrival. If they display any COVID-19 symptoms\*, please call to cancel your registration and receive a refund.
- Minimize your camper's exposure to people outside your household for 2 weeks prior to arrival.
- If at all possible, finish any remaining registration tasks (send copy of insurance card, submit waivers, pay remaining camp balance or load canteen account online, etc.)

#### AT CHECK-IN

- Please park and stay in your car. A check-in helper will come to you to begin check-in.
- A health screening will be conducted carside. If you know your camper will not pass the health screening, please do not bring them to camp. **Campers will not be admitted to camp if**:
  - o Anyone riding in the vehicle has a temperature greater than 100.3 °F
  - Camper answers yes to any of the following questions:
    - Have you or anyone in your household had COVID-19 symptoms\* in the last 14 days?
    - Have you or anyone in your household been in contact with anyone displaying COVID-19 symptoms\* or diagnosed with COVID-19 in the last 14 days?
    - Have you traveled by air in the last 14 days?
- Only campers will be permitted past the check-in area this year. Staff counselors will help campers move in. The only restroom facility open to the public this year is located in the Nurse's Station.

## **DURING CAMP**

- Once a camper leaves camp, they may not return for the rest of the session.
- Any camper that develops COVID-19 symptoms\* will need to return home as soon as possible. Please list an additional pick-up person if a parent will not be available at all times during the camp session.
- Notify us immediately if anyone in camper household is asked to quarantine due to possible exposure.
- Masks will not be required of campers except in our storm shelter. Campers may bring and wear their own masks at other times if they wish. If you expect your camper to wear a mask, discuss this with your camper; Camp Challenge staff is not responsible for enforcing optional mask use.
- Paintball will not be offered at any session this year.
- We will increase cleaning of high-touch surfaces, offer frequent opportunities to wash hands, have unrestricted access to hand sanitizing stations, and plan activities that prioritize physical distancing, but please know that your camper WILL come into close physical contact with others due to the very nature of camp. If this is a problem for you or your camper, do not send them to camp this year.

#### **AFTER CAMP**

- Monitor health for 2 weeks after camp. Call a doctor if your camper develops COVID-19 symptoms\*.
- If camper is diagnosed with COVID-19 within 2 weeks of attendance, please notify us immediately.

\*COVID-19 symptoms: fever/chills, cough, shortness of breath, trouble breathing, congestion, sore throat, runny nose, fatigue, muscle/body aches, headache, new loss of taste/smell, nausea, vomiting, or diarrhea

# CAMP CHALLENGE INDIANA, INC. PARTICIPANT AGREEMENT, RELEASE, AND ASSUMPTION OF RISK CONCERNING COVID-19

#### **ACKNOWLEDGEMENTS:**

I acknowledge that the illness commonly known as "coronavirus" (hereafter "COVID-19") is a worldwide pandemic. I acknowledge that COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact.

I further acknowledge Camp Challenge Indiana, Inc. ("Camp Challenge") cannot guarantee that any participants in Camp Challenge activities, or attendees at Camp Challenge, will not become infected with COVID-19. I acknowledge attendance at Camp Challenge, or participation in Camp Challenge activities, could increase the risk of contracting COVID-19 and that such exposure or infection may result in personal injury, illness, permanent disability, or death.

I understand that the risk of becoming exposed to or infected by COVID-19 at Camp Challenge may result from the actions, omissions, or negligence of myself and others; including, but not limited to, Camp Challenge employees, directors, volunteers, participants, or their families.

#### **COVENANTS:**

In consideration of being permitted by Camp Challenge to participate in its activities and to use its equipment and facilities, I voluntarily agree to assume all of the foregoing risks that I, and/or the minors listed below, may be exposed to or become infected by COVID-19 by attending Camp Challenge or participating in Camp Challenge activities. I accept sole responsibility for any injury to myself, or the minors listed below, including, but not limited to, personal injury, disability, death, illness, damage, loss, claim, liability, or expense of any kind, resulting from COVID-19.

I hereby release, covenant not to sue, discharge, indemnify and hold harmless Camp Challenge, their agents, owners, principles, directors, officers, members, managers, volunteers, employees, and all other persons or entities acting in any capacity on their behalf, from any and all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating to personal injury, disability, death, illness, damage, loss, claim, liability, or expense, of any kind stemming from COVID-19. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of Camp Challenge; whether a COVID-19 infection occurs before, during, or after attendance at Camp Challenge, or participation in any Camp Challenge activity.

I hereby sign this Participant Agreement, Release and Assumption of Risk Concerning COVID-19 on behalf of myself and the following minor children:

Name:	Date of Birth:
Name:	Date of Birth:
Name:	Date of Birth:
I further certify that I am the parent or legal guardian of the minor(s) on this agreement and I have the power and authority to sign this agreement on behalf of and to bind the listed minor(s) to the terms of this document.	
Parent/Guardian's Signature:	
Printed name:	Date: