

ADVENTURE CAMPS AT SKI ROUNDTOP
REGISTRATION FORM

CAMPER INFORMATION:

Name _____ Age _____ T-Shirt Size YM YL AS AM AL AXL Phone _____

Address _____ City _____ State _____ Zip _____

Parent/Guardian Name(s) _____

Email Address _____ Contact Phone _____

REGISTRATION INFORMATION:

Dates Attending (circle) June 15 – 19 June 22 – 26 July 13 – 17 July 20 – 24 July 27 – 31
Tuition (\$249 per session) _____ Number of persons attending Friday's lunch _____

Payment Type Credit Card: MasterCard Visa Discover
Cash Check Card # _____ Exp Date _____

EMERGENCY CONTACTS:

Name _____ Phone _____

Name _____ Phone _____

Please complete the following MEDICAL INFORMATION:

Ski Roundtop will comply with all applicable state and federal laws related to privacy of information.

YES	NO	Does your child currently have:
_____	_____	Allergic reactions to insects, food or plants? Anaphylaxis? Specify _____
_____	_____	Do you carry Epinephrine?
_____	_____	Allergic to medication? Specify _____
_____	_____	Currently taking any Prescriptions or Meds? Specify _____
_____	_____	Diabetes?
_____	_____	Heart Disease?
_____	_____	Epilepsy/Seizures?
_____	_____	Asthma?
_____	_____	Mental or Neurological problems?
_____	_____	Musculoskeletal injuries, breaks, sprains, dislocations?
_____	_____	Allergic reactions to insects, food or plants? Anaphylaxis?
_____	_____	Ever had surgery?

Please explain any "yes" answers or other concerns _____

Name of Primary Care Physician _____ Phone _____

Health Insurance Co. Name _____ Phone _____

Verification of Accuracy and Full Disclosure

I acknowledge that I have provided all known medical related information that may effect my child's participation. I agree to notify the staff if there is any change in my or my child's physical or medical condition prior to my child's scheduled activity.

Please initial here _____

Consent for Medical Treatment

I consent to emergency first aid or medical treatment, which may become necessary during or in connection with my minor child's participation while at the Ski Roundtop Adventure Camp.

Please initial here _____

ADVENTURE CAMP RELEASE AGREEMENT

NOTICE OF RISK

I, the undersigned do hereby understand, acknowledge and agree that participation in the Roundtop Adventure Camp will include outdoor adventure activities such as; Team Building, High and Low Ropes, Zip Lines and other climbing related activities, Canoeing, Kayaking, Fishing and Hiking. These activities like all outdoor adventure activities contain an inherent risk of serious injury or death.

I understand that I may choose to not to allow my child's participation in a specific activity and may opt out of the same, by listing that activity below:

My child should not participate in: _____

ASSUMPTION OF RISK

UNDERSTANDING THE HAZARDS INHERENT TO THE ACTIVITY, I AGREE TO ASSUME FOR MY MINOR CHILD, ALL OF THE RISKS INVOLVED.

RELEASE FROM LIABILITY

In consideration of being allowed to participate in the Adventure Camp at Ski Roundtop, I AGREE NOT TO SUE, TO RELEASE, HOLD HARMLESS, INDEMNIFY AND DEFEND SKI ROUNDTOP OPERATING CORP., ITS OWNERS, AGENTS AND EMPLOYEES, FROM ANY AND ALL LIABILITY, IN ANY WAY RELATED TO MY CHILD'S PARTICIPATION OR USE OF THE FACILITIES REGARDLESS OF ANY NEGLIGENCE ON THE PART OF THE SAME.

I agree that I will advise the facilitator of any medical or health concern that might effect my child's participation in the program.

I agree to report all injuries to a facilitator or other staff member before leaving the area.

I hereby grant my permission for Ski Roundtop to use any photograph, film, videotape or sound recording of my child for any legitimate business purpose.

I agree that all disputes arising under this contract shall be litigated exclusively in the Court of Common Pleas of York County, Pennsylvania or in the United States District Court for the Middle District of Pennsylvania. This agreement is governed by the applicable laws of this state. If any part of this agreement is determined to be unenforceable, all other parts shall be given full force and effect.

I hereby give my permission for my child to attend the Roundtop Adventure Camp, and to participate in all related activities, except those I listed above. I agree that I have read, understand and the "Notice of Risk", "Assumption of Risk" and "Release of Liability" and agree to be legally bound hereto.

Signature of Parent or Guardian

Date

(The signature of one parent or guardian binds both parents or guardians in reference to this agreement)