

Global Youth Ministry  
Global Youth Camps  
40 Blackhawk Trail  
Chatsworth, GA 30705  
877-251-1800  
[www.globalyouthministry.org](http://www.globalyouthministry.org)



## Camp Medical Information & Release Form

Name \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_  
Church/Org \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

### In case of emergency, notify:

Name \_\_\_\_\_ Phone \_\_\_\_\_ Phone 2 \_\_\_\_\_  
Address \_\_\_\_\_ Relationship \_\_\_\_\_

### Family Physician:

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

### Insurance Information

Provider: \_\_\_\_\_ Policy No. \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Policy Holder \_\_\_\_\_ Type of plan:  group  individual

### Allergies/Other Info

Penicillin  Insect Bites  Hay Fever

Poison Ivy  Other: \_\_\_\_\_

Date of last Tetanus shot: \_\_\_\_\_

Is the participant on any prescribed drugs/medication:  yes  no

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

What medications will be brought to camp/retreat? \_\_\_\_\_

**NOTE:** Any/all medications that are brought to camp MUST be turned in to the designated adult from the sponsoring church/organization during a minor's stay. No student/minor may be allowed to keep any prescription drugs/medication in their possession at any time, except as supervised by designated sponsor.

**Photo Release:** With participation, I give permission for myself/my child to be photographed, and/or videotaped while participating in the above stated camp/retreat for the purposes of publicity, staff training, and/or promotion.

I, the participant/parent/guardian as signed below, hereby give consent and/or authorization for the individual listed on this form to be examined by medical or dental personnel, as dutifully licensed to practice under the laws of the state; and to provide necessary treatment and/or hospitalization that in their professional opinion is necessary to maintain the life, health, or well being of the individual. I also understand that my insurance is primary in any and all claims, and the sponsoring church or organization becomes secondary. I have examined this form and find that all information is correct and true to the best of my knowledge.

\_\_\_\_\_  
Signature of participant (over 18) OR  
Signature of parent or guardian (if participant is under 18)

\_\_\_\_\_  
Date

**GLOBAL YOUTH MINISTRY  
OUTDOOR ACTIVITIES PARTICIPATION AGREEMENT  
ASSUMPTION OF RISK AND RELEASE**

In consideration of the services of Global Youth Ministry, and Alpine Towers International, Inc, their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (hereinafter collectively referred to as GYM/ATI), I hereby agree to release, indemnify, and discharge GYM/ATI, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that my participation in ropes course, blob, hiking, and other outdoor activities entails known and unanticipated risks, which could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity.

GYM/ATI programs are based on the "challenge by choice" principle. At any time you and/or your group are free to withdraw from participation in any outdoor activities. The risks include, among other things, the potential for: slips, falls and falling, rope burns, pinches, scrapes, twists and jolts that could result in scratches, bruises, sprains, lacerations, fractures, concussions, or even more severe life threatening hazards. During and activity there may be contact with plants, animals, or insects that could create hazards such as stings, allergies, and associated diseases.

Furthermore, GYM/ATI instructors have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities, they might misjudge the weather.

2. I expressly agree and promise to accept and assume all of the risks existing in this activity. My participation in this activity is purely voluntary, and I elect to participate in spite of the risks.

3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless GYM/ATI from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of GYM/ATI equipment or facilities, including any such claims which allege negligent acts or omissions of GYM/ATI.

4. Should GYM/ATI 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.

5. I certify that I have adequate insurance to cover any injury or damage I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition I may have.

6. In the event that I file a lawsuit against GYM/ATI, I agree to do so solely in the state of Georgia, and I further agree that the substantive law of that state shall apply in that action without regard to the conflict of law rules of that state. 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.

By signing this document, I acknowledge that if anyone is hurt or property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against GYM/ATI on the basis of any claim from which I have released them herein.

I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms.

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_

Printed Name of Participant \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

**GLOBAL YOUTH MINISTRY  
MOUNTAIN ROCK STABLES  
EQUINE PARTICIPATION AGREEMENT  
ASSUMPTION OF RISK AND RELEASE**

Global Youth Ministry and Mountain Rock Stables require that all participants in Equine activities sign this Participation, Assumption of Risk and Release form in order to be eligible to participate in equine activities.

The undersigned acknowledges and understands the following:

1. During Equine activities certain risks and dangers are present, and
2. These risks may include physical or psychological damage and/or injury, not excluding fatality, due to accidents which may occur resulting from Equine activities.

The undersigned agrees that while participating, the participant will abide by all of the policies and procedures of Global Youth Ministry and Mountain Rock Stables regarding Equine activities provided the participant in order to maintain the utmost level of safety for the participant.

**WARNING: UNDER GEORGIA LAW AND EQUINE ACTIVITY SPONSOR OR EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES. PURSUANT TO CHAPTER 12 OF TITLE 4 OF THE OFFICIAL CODE OF GEORGIA ANNOTATED.**

An Equine animal is defined as a horse or pony. An Equine activity is defined as riding, handling, training, driving, assisting in the medical treatment of, being a passenger on, or assisting a participant or sponsor with an Equine animal.

In consideration of the above, I have and do hereby assume all of the risks of participation in Equine activities and will hold Global Youth Ministry and Mountain Rock Stables, their employees, agents, trustees, officers, and affiliates harmless from any and all liability, actions, causes of actions, claims, and demands of every kind and nature whatsoever, whether for bodily injury, property damage or loss or otherwise, which my child now has or which may arise from or in connection with my participation in Global Youth Ministry's and Mountain Rock Stables' Equine program and activities. I, along with my family or heirs, understand and agree that we cannot sue Global Youth Ministry, Mountain Rock Stables, their employees, trustees, affiliates and associates, and if I do, I cannot collect any money. In addition, I will pay for Global Youth Ministry's and Mountain Rock Stables' attorney and court fees associated with any litigation I might bring against their employees, agents, trustees, officers, affiliates, and associates. I also state that neither I am nor my child (if I am signing on behalf of my child) is under or will be under the influence of any chemical substance including alcohol, either at the time of the signing of this Agreement or at the time of participating in Equine activities. I fully understand that my child's physical activity involves the potential risk of injury. I also understand that my child's participation in Global Youth Ministry's and Mountain Rock Stables' Equine program and activities is entirely voluntary.

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Name of Child (please print)

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Signature of Parent/Guardian

Date

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Name of Parent/Guardian (please print)