



SERVANT RELEASE FORM 2008

(Keep a copy of this form for your records.)



LAST

This form must be filled out annually in order to participate in Sky Ranch programs. Please type or print. Fill out one form for each camper attending. Return this form with your balance due by May 1, 2008.

FIRST

DATES

PROGRAM

CAMPER INFORMATION:

Last Name: _____ First Name: _____
 Address: _____ ID: _____
 Church: _____ City / St: _____

PARENT OR GUARDIAN INFORMATION: (Adult sponsors do not need to fill out this section.)

Mother's Name: _____ Home Phone: () _____
 Address: _____ E-mail: _____
 Employer: _____ Work Phone: () _____
 Address: _____

Father's Name: _____ Home Phone: () _____
 Address: _____ E-mail: _____
 Employer: _____ Work Phone: () _____
 Address: _____

EMERGENCY CONTACT: (someone different from above)

Other Adult: _____ Home Phone: () _____
 Address: _____ Relationship: _____
 Employer: _____ Work Phone: () _____
 Address: _____ E-mail: _____

PERSON AUTHORIZED TO TAKE CHILD FROM CAMP:

Either Parent Mother Only Father Only Other Adult (if different from above, please list below):

Name: _____ Home: () _____ Work: () _____

In case of emergency, I understand every effort will be made to contact me and the authorized persons named above. In the event we cannot be reached, I give my permission to camp officials to provide for the camper named above any medical or surgical care. I understand that Lutheran Ranches of the Rockies does not carry health/accident insurance on its campers and I will accept the expense of emergency medical or surgical treatment through personal insurance or personal resources.

I hereby release Lutheran Ranches of the Rockies, its agents, members, and employees, from all liability for any accident, injury or claim arising from the camper named above's use of any of its facilities, or participation in any of its programs.

Lutheran Ranches of the Rockies may use, for promotional purposes, any photographs taken of the camper named above.

I give permission for the camper named above to go on Lutheran Ranches of the Rockies staff supervised trips away from camp premises, whether on foot or by vehicle.

I give permission for the camper named above to participate in all appropriate elements of group building. I understand that low challenge activities are available with age appropriate activities for all ages.

I give permission for the camper named above to participate in all camp activities with the following exceptions:

 (Signature of Parent, Guardian or Adult Participant) (Date)

CONTINUED ON REVERSE SIDE