



Spiritual Enrichment Program of South California is herein referred to as SEP So. Cal. throughout the rest of this document. SEP So. Cal. ~ 619-578-4245 ~ [www.sepsocal.org](http://www.sepsocal.org) ~ fax: 619-564-3445

**Camp Dates: Sun., July 11 through Sat., July 17, 2010**

## **2010 Junior Camper (ages 8-12) Parental/Guardian Consent Form**

The registration process will not be complete until this document has been signed and returned.

**Camper applicants MUST read and sign pages 2, 4 & 6.**

**The parent/guardian MUST read and sign pages 2, 4, 5 & 6 and return this form.**

You can either: 1) mail it to SEP So. Cal., P.O. Box 356, Lemon Grove, CA 91946

2) fax it to 619-564-3445

3) scan and attach to an email to [sepsocal@cox.net](mailto:sepsocal@cox.net)

Call Mark & Anne Stapleton, Camp Directors, at 619-578-4245 with questions.

**Please initial after each statement and then sign and date it at the end.**

### **Cancellations** (please initial next to the statement)

\_\_\_\_\_ I understand that all cancellations of registration for SEP So. Cal. Youth Camp by June 25, 2010 are subject to a \$50 fee and that no refunds will be given after June 25, 2010.

### **Physical Condition** (please initial next to the statement)

\_\_\_\_\_ I understand that SEP So. Cal. Youth Camp is held in a physically demanding environment: 7,000 ft elevation, high temperatures and lots of walking over hilly terrain. By registering my youth for SEP So. Cal. Youth Camp, I agree that he/she can engage in all SEP So. Cal. related activities.

\_\_\_\_\_ I understand that at registration, my child will be given a physical screening at which time he/she have their temperature taken and will be checked for head lice. If my child is deemed at risk (high fever, infection, contagious, etc.) or has head lice, they **will not** be admitted camp at that time. SEP So. Cal. has a no refund policy after June 25<sup>th</sup>, but individual cases may be handled by the Camp Director.

\_\_\_\_\_ If understand that if my child needs any type of over-the counter or prescribed medication during camp, he/she **may not** keep it in the dorm but that it must be checked in with the Camp Nurse during registration.

### **Photo/Video Release** (please initial next to the statement)

\_\_\_\_\_ I understand that SEP So. Cal. may use any photo or video taken of the participant at any SEP So. Cal. event in their publications or on their website. Said pictures including the individual camper's name may be used by SEP So. Cal. and its sponsor(s) Generations Ministry and the Worldwide Church of God without limitation or compensation to the undersigned.

### **Participation** (please initial next to the statement)

\_\_\_\_\_ I understand and support the fact that my child will be asked to participate in all activities at SEP So. Cal. unless there are specific limitations that have been listed on the Physical Health portion of the application or have been discussed with the camp nurse or camp directors.

### **Transportation off Campus** (please initial next to the statement)

\_\_\_\_\_ I realize that I am responsible for transporting my child to SEP So. Cal. Youth Camp in Big Bear Lake, CA on July 11, 2010 between 2 - 5 p.m. and for picking them up from the same location on July 17, 2010 by 10:30 a.m. I realize that I am also responsible for picking up my child early at my own expense if he/she has a medical or behavioral situation (see 4-strike policy outlined in the Standards of Conduct Agreement) and that no refund will be made.

\_\_\_\_\_ I give permission for my child to be transported off the camp property in case of emergency or for any prescheduled SEP So. Cal. supervised activities such as the Junior Camp trip to the Alpine Water Slide in Big Bear Lake, CA. I understand that all drivers will be screened and will have a CA license and proof of insurance on file, and all passengers will have their own seat belt. I also understand that there will be a sufficient ratio of adults to children at all off campus activities.

**Consent** (please initial next to the statement)

\_\_\_\_\_ If my child needs immediate medical attention and SEP So. Cal. is unable to contact myself, another guardian or the one of the listed emergency contacts through reasonable effort, I give my consent for SEP So. Cal. to provide all emergency medical care deemed necessary by an official of the Camp in consultation with any physician or hospital without obtaining further consent. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes.

\_\_\_\_\_ I acknowledge that participation in the activities at SEP So. Cal. may involve risk of injury to my child or damage to the property of my child. I understand that, due to the nature of some of these activities, such risks cannot be completely eliminated. I voluntarily accept all risk of injury and realize that SEP So. Cal. does not provide medical coverage to a participant if injured while participating in any of the events sponsored by this camp. I understand that any medical costs incurred as a result of an injury or illness while at SEP So. Cal. will be my full financial responsibility.

**SEP So. Cal. Release and Covenant Not to Sue** (please initial next to the statement)

\_\_\_\_\_ We, the undersigned, the Applicant and parent/guardian(s) of the minor Applicant named in this document, in consideration of the Applicant being allowed to participate in SEP So. Cal. (Spiritual Enrichment Program of Southern California) hereby agree as follows: This document is a covenant not to sue and to release, indemnify and save and hold harmless the Worldwide Church of God, a California corporation, all its affiliated organizations and boards of trustees or directors, officers, agents and employees and volunteers (herein collectively "Church"), from and against claims or suits brought against the Church for bodily, psychological or emotional injuries including death, sustained by the Applicant arising out of Applicant's attendance at SEP So. Cal. or any of its activities, whether said injuries are caused by the Church's negligence or not.

\_\_\_\_\_ I understand that this release shall not be applicable to claims covered and fully compensable by no-fault medical or accident insurance carried by the Church for SEP So. Cal. activities, liability insurance carried by the Church for its negligence, or insurance carried by the parents or Applicant, but shall be fully applicable to that portion of said claim that is in excess of policy limits or for claims which are not covered by said insurance.

**Signatures**

THE UNDERSIGNED HAVE CAREFULLY READ THIS DOCUMENT AND FULLY UNDERSTAND AND AGREE WITH ALL OF THE ABOVE.

Applicant: \_\_\_\_\_  
(Camper) PRINTED NAME

**X** \_\_\_\_\_  
Applicant Signature Date

(A Parent/Guardian Signature is required if applicant under 18 yrs. of age)

Parent/Guardian: \_\_\_\_\_  
PRINTED NAME

**X** \_\_\_\_\_  
Parent/Guardian Signature Date

(Additional signature if available)

Parent/Guardian: \_\_\_\_\_  
PRINTED NAME

**X** \_\_\_\_\_  
Parent/Guardian Signature Date

Should any significant changes in health status occur between the time this form is completed and when the participant arrives at camp, please communicate these changes in writing.

**Please mail this completed Application with the rest of this Registration Packet to:**

Mark and Anne Stapleton, *Camp Directors*, SEP - So. Cal., P.O. Box 356, Lemon Grove, CA 91946-0356

**sepsocal@cox.net - www.sepsocal.com – 619-578-4245 – fax 619-564-3445**



Spiritual Enrichment Program of  
Southern California

## 2010 Camper Standards of Conduct Agreement

Please complete and return this form to:  
SEP So Cal, P.O. Box 356 Lemon Grove, CA 91946-0356  
Fax at 619-564-3445 or sepsocal@cox.net

**Attention: Campers & Parents/Guardians – Please read and sign this document together.**  
(If there is more than one camper in your household, please have each one sign an Agreement)

- I, \_\_\_\_\_ (*camper's name*), hereby promise to treat everyone – campers and staff – with respect and consideration.
1. I understand that there will be no tolerance for fighting, racism, harassment or abusive behavior of any kind.
  2. I promise to try hard at everything I do during activities and to be a good sport.
  3. I will be the best camper and friend that I can be. I will strive to obey all camp rules regarding cussing, swearing and foul & abusive language because I understand that it is disrespectful and offensive to others. I also realize that I am responsible for my own actions: if I make a mess, I will clean it up; if I break something, I will fix or replace it.
  4. I agree not to pierce or tattoo myself or cut or dye my hair while at camp. I promise to leave the clippers, scissors and hair dye at home.
  5. I will not write on, cut, deface or destroy my clothing at camp – especially my camper T-shirts. If I do, I will have to purchase a new T-shirt. I understand that on the final day of camp, staff and campers will be allowed to sign each other's T-shirts so they can be saved as keepsakes.
  6. I will dress appropriately during camp by not wearing my pants/shorts in such a way that my underwear shows. Nor will I wear my shirt in such a way that my bellybutton shows. I realize that everything I do (including the way I dress) should be modest and done to glorify God and be respectful to myself and to others.
  7. It is understood that SEP So. Cal. is not responsible for articles of clothing or personal belongings lost or damaged by fire, theft, etc. I will label my clothing and personal items. I understand that SEP So. Cal. does not recommend bringing clothing, jewelry or cameras that are expensive or irreplaceable. Since there are not locks on the doors in the dorms, SEP So. Cal. is not responsible for lost or broken items or equipment. I understand that cell phones, electronic games or devices, radios, CD players and IPOD's/MP3 players are all discouraged and that if I do bring one or more of these items to camp, it will be stored for the week in a safe place by the Counselor and will be returned to me on departure day.
  8. It is understood and agreed by campers and parent/guardians that a camper's use of drugs, or drug paraphernalia, tobacco products, alcoholic beverages, and/or illegal controlled substances, weapons, and/or violent behavior including teasing and hitting is not permitted and will be *cause for immediate dismissal* from camp. (There will be no refunds.)
  9. It is understood that sneaking out of the dorms/cabins at night is unsafe and will *result in immediate dismissal*. I agree not to run away from my dorm mates when at an activity together or leave my dorm room/area without permission from my counselor.
  10. I understand the SEP So. Cal. has clear limits on sexual behavior and does not allow unmarried couples to engage in sexual activities of any kind. Minimal forms of hugging are allowed such as side-hugging, however long intimate bear-hugs are not acceptable. Kissing, holding hands, sitting on laps, giving and/or receiving massages or any type of sexual behavior is prohibited and may be cause for immediate dismissal.
  11. I understand that I am not allowed to bring over-the-counter medications to camp. This would include - but is not limited to – Tylenol, Advil, non-prescription allergy medications or skin and first aid remedies. Any medication that will need to be used on an ongoing basis while at camp must be checked in with the Camp Nurse upon arrival at registration. All medications will be kept in the infirmary so the nurse may dispense them and keep a record of their use. *Campers may not store or administer their own medication in their dorms.* (Exceptions may include campers with a history of asthma who need to keep their inhaler with them at all times and for those with anaphylactic allergies who need to keep an EPI-PEN with them for emergency use. These exceptions should be discussed with the Camp Nurse at registration.) Please note any medication needs on the Health Evaluation Form if you have not already done so.

12. I understand that SEP So. Cal. is dedicated to every camper having the chance to enjoy a positive camp experience. In the event that rules are broken, I understand that there is a "4-Strike" policy that will be carried out:

- 1<sup>st</sup> incident = Strike 1. The counselor or activity leader will talk with the camper about the infraction and the Director will be informed.
- 2<sup>nd</sup> incident = Strike 2. The camper will be suspended from an activity or activities and the Camp Chaplain or Camp Director will talk with the camper.
- 3<sup>rd</sup> incident = Strike 3. The camper will call home to notify the parents/guardians of what has been occurring and inform them that if there is one more incident, the camper will be dismissed from camp.
- 4<sup>th</sup> incident = Strike 4. The camper will be dismissed from camp and the parents/guardians will be called and asked to pick up the camper. No refund will be given. (Exceptions to the 4 strike policy are the "immediate dismissal" items #8 & #9 on page 3.)

We are very enthusiastic about our 9<sup>th</sup> SEP So. Cal. Summer Camp! It is a week that has been built on many months of prayer and planning. We feel that the most important part of this camp is to have an opportunity to develop a closer walk with God. We also hope you make new friends, visit with old friends, meet some positive role models and have lots of fun! The staff, counselors, and church members from local churches have been praying for your time up on the mountaintop and will continue praying during the entire week of camp. It is our hope that all that is said and done will be to the glory and honor of our Lord and Savior.

See you soon,



Mark & Anne Stapleton  
SEP So. Cal. Camp Directors

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Youth's signature below verifies they have read the above standards and agree to abide by them.

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*Camper Applicant's printed name*

*Applicant's signature*

*Date*

Parent/Guardian signature below verifies that they have read the above standards and agree to support the terms which have been set forth – especially the "4-strike Policy" as stated above.

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*Parent/guardian's printed name*

*Parent/guardian's signature*

*Date*

***Please Sign & Return to:***

Mark and Anne Stapleton, *Camp Directors*, SEP - So. Cal., P.O. Box 356, Lemon Grove, CA 91946-0356

**sepsocal@cox.net - www.sepsocal.com – 619-578-4245 – fax 619-564-3445**

## **Alpine Slide & Water Park at Magic Mountain**

800 Wildrose Lane ~ Big Bear Lake, Ca 92315 ~ 909-866-4626 ~ <http://www.alpineslidebigbear.com> ~ [Alpineslide@charter.net](mailto:Alpineslide@charter.net)

### **NOTICE**

#### **RELEASE AND WAIVER & ASSUMPTION OF RISK**

**PLEASE BE ADVISED THAT YOU MUST READ THIS AGREEMENT  
AND CONFIRM THAT YOU HAVE READ IT BY SIGNING IT**

***PLEASE READ CAREFULLY BEFORE SIGNING OR  
PARTICIPATING IN ANY ACTIVITIES AT OUR FACILITY***

**WARNING** – Riding the ALPINE SLIDE, tubing (using a rubber inner tube to slide on snow), riding the water slide and riding/driving a go cart (collectively referred to as the “ACTIVITIES”) at this facility are **dangerous** activities.

Engaging or participating in any of the ACTIVITIES is done at your own risk. Some of the dangers and risks associated with the ACTIVITIES include, among others, collisions with obstacles (both man-made and natural), collisions with other persons, sleds and tubes, or going “off course” and landing in a non-ACTIVITIES area, all of which can cause a variety of personal harm and damage to your property.

BY SIGNING THIS RELEASE AND WAIVER, YOU ACKNOWLEDGE YOUR UNDERSTANDING AND AGREEMENT THAT:

1. ENGAGING IN THE ACTIVITIES IS DANGEROUS AND THAT YOU ASSUME THE RISK OF INJURY WHICH MAY RESULT FROM SUCH PARTICIPATION. THIS APPLIES TO ALL PARTICIPANTS UNDER THE AGE OF 18 FOR WHOM A PARENT OR GUARDIAN HAS SIGNED THIS RELEASE AND WAIVER.
2. YOU HERBY RELEASE AND WAIVE ANY AND ALL CLAIMS, LOSSES, INJURIES, OTHER DAMAGES, INCLUDING DEATH, THAT MAY OCCUR OR ARISE OUT OF, FROM, OR ARE RELATED TO, CAUSED BY OR RESULT FROM YOUR PARTICIPATION IN ANY OF THE ACTIVITIES (COLLECTIVELY, THE “CLAIMS”) AND THAT YOU SHALL HOLD BIG BEAR FAMILY RECREATION, INC. dba “ALPINE SLIDE AT MAGIC MOUNTAIN,” SLIDE SUPPLY, INC., CHAPS LEASING, INC. AND THEIR AFFILIATES, SUPPLIERS, MANUFACTURERS, VENDORS, OFFICERS, DIRECTORS, EMPLOYEES, AGENTS, ASSIGNS, MANAGERS, SUCCESSORS IN INTEREST, PARTNERS, REPRESENTATIVES, ASSIGNEES AND ANY OF THE OWNERS OF THE PROPERTY UPON WHICH THE ACTIVITIES ARE OPERATED, HARMLESS FROM AND AGAINST SUCH CLAIMS, REGARDLESS OF WHETHER SUCH INJURY WAS CAUSED BY THEIR NEGLIGENCE, A BREACH OF WARRANTY OR FROM ANY OTHER CAUSE.

3. YOU HAVE READ AND UNDERSTOOD THE POSTED RULES, REGULATIONS AND PROCEDURES REGARDING YOUR PARTICIPATION IN ANY OF THE ACTIVITIES AND THAT YOU AGREE TO ABIDE BY AND FOLLOW THOSE REGULATIONS AT ALL TIMES, INCLUDING THE RULES THAT REQUIRE YOU TO REMAIN SEATED IN THE ALPINE SLIDE SLED AND TO OPERATE THE BRAKE IN THE SLED SO AS TO MAINTAIN A SAFE SPEED AND AN APPROPRIATELY SAFE DISTANCE BETWEEN YOU AND OTHERS AND TO KEEP YOUR ARMS AND LEGS INSIDE THE SLED DURING OPERATION.
  
4. NO PERSON UNDER THE AGE OF 18 IS PERMITTED TO PARTICIPATE IN ANY OF THE ACTIVITIES UNLESS AND UNTIL THE PARENT OR GUARDIAN OF THAT PERSON HAS SIGNED THIS **RELEASE AND WAIVER & ASSUMPTION OF RISK** AGREEMENT. THE PARENT OR GUARDIAN OF SUCH MINOR SHALL BE SOLELY RESPONSIBLE FOR THAT MINOR; AND,
  
5. YOUR SIGNATURE ON/AT/IN THE ELECTRONIC SIGNATURE MACHINE CONSTITUTES YOUR ORIGINAL SIGNATURE TO THIS **RELEASE AND WAIVER & ASSUMPTION OF RISK** AGREEMENT AND THAT A REPRODUCED VERSION, COPY OR OTHER FACSIMILE OF YOUR SIGNATURE MAY BE USED AS AN ORIGINAL OF YOUR SIGNATURE, WHETHER SIGNED BY YOU ON YOUR OWN BEHALF OR BY YOU AS THE PARENT OR GUARDIAN OF A MINOR.

PLEASE CONDUCT YOURSELF IN A RESPONSIBLE AND SAFE MANNER  
AND BE CONSIDERATE OF OTHERS  
WHILE PARTICIPATING IN THE ACTIVITIES.

Guardian Signature \_\_\_\_\_

Guardian's PRINTED Name \_\_\_\_\_

Child's PRINTED Name \_\_\_\_\_ Date \_\_\_\_\_