

**GRACE BROTHERS YOUTH SPORTS CAMP
HEALTH & RELEASE FORM
*BRING THIS FORM WITH YOU WHEN YOU CHECK IN***

(Your child will not be admitted to camp without this form completed and signed)

Athlete's Name: _____
Sex: _____ **Birthday:** _____ **Age:** _____ **Weight:** _____ **Height:** _____
Address _____ **City** _____ **State** _____ **Zip** _____
Home Phone (_____) _____ **Work Phone** (_____) _____ **E-Mail** _____
My Name and Phone Number I can be reached at _____ (_____) _____
Person to contact in the event that I cannot be reached _____
Phone number of emergency contact person (_____) _____

HEALTH INSURANCE INFORMATION

Carrier Name: _____ **Policy Number:** _____
Policy Holder Name: _____ **Policy Holder Date of Birth:** _____

I, the parent (guardian) of _____, **give permission for the named athlete to receive emergency, medical or surgical treatment and hospitalization if necessary. I understand that every attempt will be made to contact me, or the emergency contact named above, before taking this action. I will be financially responsible for any medical attention needed during the sport's season or resulting from an injury received at any Grace Brethren Youth Camp Athletics' event. My medical insurance shall be the insurance coverage for any medical treatment. I HAVE READ THE REGISTRATION PACKET AND FULLY UNDERSTAND OUR OBLIGATIONS STATED THEREIN AND ALSO THE RIGHT OF Grace Brethren Youth Camp AND HERBY AGREE TO ACT IN ACCORDANCE.** I further understand that Grace Brethren Youth Camp retains the right to use for publicity and advertising purposes, photographs of athletes taken at Grace Brethren Youth Camp events. The undersigned further expressly agrees that the attached waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by law; and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Parent's Name (Please Print): _____
Signed _____ **Date:** _____

RELEASE OF LIABILITY – READ BEFORE SIGNING

In consideration of my minor child/ward _____ ("my child") being allowed to participate in this sport's program, its related events and activities, I, the undersigned, acknowledge, appreciate, and agree that:

1. The risk of serious injury from the sports activities involved in this program is always present due to the nature of the sport(s); and
2. FOR MYSELF, SPOUSE, AND CHILD, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my child's participation; and
3. I willingly agree to comply with the program's stated and customary terms and conditions for my child's participation. If, however, I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from participation and bring such to the attention of the nearest official immediately; and
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS the organization, Grace Brethren Church and Schools, their officers, officials, agents and/or employees of Grace Brethren Jr./ Sr. High School Athletics, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for activity ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH OR LOSS OR DAMAGE TO PERSON OR PROPERTY, regarding my child and/or arising from his/her activities, WHETHER ARISING FROM NEGLIGENCE OF THE RELEASEES OR OTHERWISE, except for willful misconduct, or otherwise to the fullest extent of the law. I HAVE READ THIS HEALTH FORM AND RELATED CERTIFICATIONS, THE RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND THEIR TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN FREELY, VOLUNTARILY, WITHOUT ANY INDUCEMENT.

Dated: _____ **Parent or Guardian Signature:** _____
Dated: _____ **Athlete Signature:** _____

Agreement to Arbitrate Disputes

IN THE EVENT OF ANY DISPUTE PERTAINING TO ANY PROVISION OF THIS AGREEMENT, OR PERTAINING TO THE SERVICES RENDERED PURSUANT TO THIS AGREEMENT, OR IN ANY WAY RELATED TO ATTENDANCE AT THIS PROGRAM, INCLUDING ANY CLAIM FOR PERSONAL INJURY OR OTHER LOSS, INCLUDING ANY CLAIM AGAINST GRACE BRETHREN CHURCH AND SCHOOLS, ANY DIRECTOR, EMPLOYEE OR AGENT OF GRACE BRETHREN JR/SR HIGH SCHOOL ATHLETICS OR OF ANY FOREGOING ENTITY, EACH PARTY HERETO AGREES TO SUBMIT TO A PANEL OF THREE INDEPENDENT ARBITRATORS FOR BINDING ARBITRATION. EACH PARTY TO THE AGREEMENT SHALL HAVE THE RIGHT TO SELECT ONE ARBITRATOR. THE TWO ARBITRATORS SELECTED BY THE PARTIES SHALL JOINTLY SELECT THE NEUTRAL THIRD ARBITRATOR. IF THERE IS AN IMPASSE IN THE SELECTION OF THE THIRD ARBITRATOR, THE INSTITUTE FOR CHRISTIAN CONCILIATION DIVISION OF PEACEMAKERS MINISTRIES OF BILLINGS, MONTANA, SHALL BE ASKED TO PROVIDE THE NAME OF A QUALIFIED PERSON WHO WILL SERVE IN THAT CAPACITY. THE MEDIATION AND ARBITRATION SHALL BE CONDUCTED IN ACCORDANCE WITH THE "RULES OF PROCEDURE FOR CHRISTIAN CONCILIATION" CONTAINED IN THE PEACEMAKER MINISTRIES BOOKLET, *GUIDELINES FOR CHRISTIAN CONCILIATION*. In the event either party to the agreement incurs any expense as a result of the other party's failure to comply with any provision of this agreement, the non-complying party shall be liable for reimbursement of any and all such expenses or attorney fees directly or indirectly related to failure to comply. In the event and legal action or proceeding occurs which is in any manner related to or pertaining to this agreement, attempting to challenge in a non-arbitral forum, such as a court of law, the validity or application of this agreement, the party who substantially prevails in that court or non-arbitral proceeding shall be entitled to receive reasonable costs of such action or proceeding including attorney's fees. In the arbitration itself, each party shall bear its own attorney fees. The following disclosures are intended to help you thoroughly understand the significance of agreeing to arbitrate any controversy, or claim, or issue in any controversy or claim which may arise between the undersigned client and the attorney:

A) ARBITRATION SHALL BE FINAL AND BINDING ON THE PARTIES.

B) THE PARTIES HERETO ARE WAIVING THEIR RIGHT TO SEEK REMEDIES IN COURT, INCLUDING THE RIGHT TO JURY TRIAL

C) PRE-ARBITRATION DISCOVERY IS GENERALLY MORE LIMITED THAN AND DIFFERENT FROM COURT PROCEEDINGS.

D) THE ARBITRATOR'S (S) AWARD IS NOT REQUIRED TO INCLUDE FACTUAL FINDINGS OR LEGAL REASONING AND ANY PARTY'S RIGHT TO APPEAL OR TO SEEK MODIFICATION OF RULINGS BY THE ARBITRATOR(S) IS STRICTLY LIMITED.

E) THE ARBITRATOR OR PANEL OF ARBITRATORS WILL TYPICALLY INCLUDE AN ATTORNEY OR JUDGE, ACTIVE OR RETIRED.

BY SIGNING BELOW, YOU ARE SIGNIFYING UNDERSTANDING AND ACCEPTING OF THE PROVISIONS OF THIS AGREEMENT.

I hereby certify that the above-mentioned participant is in good health and fully able to participate in all activities of Grace Brethren Youth Camp Athletics. By signing below, I am stating that I am also aware of and accept the risk inherent in the program activity. By signing below, I agree as well to hold harmless and indemnify Grace Brethren Youth Camp Athletics, Grace Brethren Church and Schools, their officers, agents and employees, from any and all liability, loss, damages, costs, refunds or expenses which are sustained, incurred or required out of the actions of my dependent in the course of the season.

Dated: _____ Parent or Guardian Signature: _____

Dated: _____ Athlete's Signature: _____