

top right corner.

(Health history form, both pages of the waiver release and indemnification agreement, and chaperone expectations)



Hello!

My name is Sara Hilf. I'm the Outdoor Education Director at Black Rock Retreat. I am so excited your child will be joining us at camp this year!

I appreciate your willingness to let us invest in your child. We're going to have such a great time. Camp is packed full of crazy, silly fun, and we'll also spend some intentional time learning more about our Creator through His creation.



There are a few things we'd like you to do in preparation for your child's trip.

Step one - Fill out the forms

The Waiver/release, health history form, and the behavior expectations form should be returned to the school. **There are FOUR pages you will need to return.** Everything you need to return is marked with an acorn on the top right corner.

Step two - Fill out the ONLINE Allergy form

The link is further down in the packet. If your student has special dietary needs, please let us know so we can make accommodations!

Step three - Help your child pack for the trip

There's a packing list below so you can assist your child in getting ready. Please check the weather for Quarryville PA and make sure to pack accordingly.

We will still do outside activities if it's raining!

Step four - Pray for and with your child.

Our staff are already praying for your child. Please join us in asking God to reveal Himself through the time your child spends at Black Rock.

Thanks!

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Permission, Release & Health History Form

Participant Name:	Date of Birth:			
SSN (optional):	Age: Sex:			
Parent/Guardian:	Home Phone:			
Home Address:	Cell Phone			
Emergency Contact:	Relationship to Student:			
	Phone:			
MEDICAL HISTORY	ALLERGIES – CHECK ALL THAT APPLY			
(for medical emergencies only)	*Food allergies must be submitted using the online form*			
Operations/ Serious Injuries (dates)	Hay Fever Penicillin			
Disability or Chronic/recurring illness	☐ Insect Stings – reaction:☐ Poison Ivy☐ Asthma			
Physical, Emotional or Mental Handicaps	Other:			
Activities Limited by Physician	Current Medications			
Family Physician & Phone	Date of Last Physical			
Does your family carry medical/hospital insu	urance? Yes No			
Carrier:	Policy/Group #			
This health history is correct, as far as I know. Authorization for Treatment: I hereby give permission to the Staff of Black Rock to administer First Aid or CPR in the event of injury or illness. I also give permission to the medical personnel selected by Black Rock to order x-rays, routine tests, treatment and necessary related transportation for me/my child. In the event aid cannot be reached in an emergency, I hereby give permission to the physician selected by Black Rock personnel to secure and administer treatment, including hospitalization for me/my child as named above.				
Signature:	Date:			
(parent/guardian signature if under age 18				

Black Rock Retreat Waiver, Release, and Indemnification Agreement

1. **ASSUMPTION OF RISK.** I expressly understand and agree that I am personally responsible for my safety and actions while using the facilities and premises and participating in the programs at Black Rock Retreat (the "Activity"). Black Rock Retreat is located in a wooded area with rustic/ unpaved paths and trails. Subsequently, there are inherent risks associated with moving about the property including but not limited to potential of leaves, stones, and sticks on wet or dry pathways. I agree to wear proper footwear and apparel for the conditions and be careful during my stay. The Activity include, but are not limited to, swimming, playing basketball, canoeing, soccer, hiking, backpacking, zip lining, dodge ball, archery, fishing, rock climbing, ropes courses, climbing wall, riding mountain bikes, campfire activities, softball, kick ball, volleyball, strenuous competition games, and other outdoor and recreational activities.

On behalf of myself and as a parent and/or legal guardian of minors participating in any Activity (the "Minor"), I acknowledge that the Activity involves inherent risk associated with the Activity including the unpredictable forces of nature; rugged and sometimes unstable terrain; a remote environment that may cause significant delays in obtaining emergency medical care, falls, breaks, and sprains; contact with harmful plants and animals; vehicle collisions and accidents; drowning and near drowning; errors in judgment and conduct, including negligence, of staff, coparticipants, and others; the failure of gear and equipment; and participants such as yourself face the risk of injury such as physical and/or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability, death, or economic loss, not excluding psychological damage or fatality due to accidents which occur from participating in such activities. You acknowledge that these Activities have inherent and unpredictable dangers that no amount of care, caution, instruction, or expertise can eliminate, but without undertaking these risks, the Black Rock Retreat experience would lose its value and appeal.

I agree to comply with all Black Rock Retreat policies and rules, including but not limited to all Black Rock Retreat policies, guidelines, signage, and instructions. I further understand that I am responsible for evaluating the risks that Minor or I may face. I understand that I am responsible for evaluating the risks Minor or I face by using the facilities and premises and participating in the Activity.

I have done so and by my signature below, by Minor's or my engagement in the Activity, and by use of transportation to and from the Activity, in exchange for the opportunity to voluntarily use the facilities, premises and programs of Black Rock Retreat, on behalf of Minor and myself, I have assumed the risk for and am responsible for our actions.

- 2. **ACKNOWLEDGEMENT OF SAFETY MEASURES TO BE UTILIZED BY GUEST AND BLACK ROCK RETREAT.** Black Rock Retreat will take certain safety measures to help prevent, as best it reasonably can, infection or the spread of illness. Black Rock Retreat will also stay apprised of any recommendations from the CDC and will consider action accordingly. In the event that the CDC or Black Rock Retreat recommends additional safety measures, I agree to pursue utilization of such safety measures upon verbal or written request of Black Rock Retreat.
- 3. **INDEMNIFICATION AND HOLD HARMLESS.** I specifically understand that I am personally responsible for Minor's and my actions and omissions, and any resulting sicknesses or injuries and agree to indemnify, defend, and hold harmless, including from reasonable attorneys' fees and/or any other associated costs, Black Rock Retreat, and its predecessors, successors, assigns, officers, directors, employees, volunteers, agents, and legal representatives (the "Releasees"), from any and all actions, claims, or demands that Minor and I, for ourselves and on behalf of our family, spouse, estate, heirs, executors, administrators, assigns and personal representatives, have or may have for any and all

sicknesses or injuries relating to or resulting from the Activity that Minor or I may suffer or sustain, regardless of cause or fault, as a result of our voluntary decision to utilize the facilities and premises of Black Rock Retreat, caused by any act or omission of Black Rock Retreat and/or Minor or by me, resulting from utilizing the facilities and premises of Black Rock Retreat, as permitted by law.

4. **PHOTO AND VIDEO RELEASE.** I give my permission for Black Rock Retreat to use my story, likeness in film or still photography in any marketing and fundraising efforts. I give my approval for my photo or filmed interview to be used in a variety of multimedia tactics including print, web, digital, news outlets and social media purposes. I acknowledge that my participation was voluntary, and I hereby further release Black Rock Retreat from any and all liability connected with the use of this media.

If you do NOT agree to the Photo and Video Release above, please state so in writing on the bottom of this form with an additional signature.

5. WAIVER OF CLAIMS. In consideration of being allowed to utilize Black Rock Retreat's facilities and premises, on behalf of myself and Minor (individually and collectively referred to herein as "Releasor"), I hereby waive any and all claims, demands, damages, actions, or suits, in law or in equity, whether heretofore or hereafter accruing, or whether now known or not known to the parties, which may arise from any negligent act or omission of Black Rock Retreat, or the Releasees, including but not limited to claims for negligence, personal injury, and mental anguish, for or because of anything done or omitted, or suffered to be done, directly or indirectly related to Releasor's use of Black Rock Retreat's facilities, premises and participating in the Activity. Releasor further waives any and all liability of Releasees for their negligence causing any accident, illness, injury, loss or damage to personal property, or any other consequences arising or resulting directly or indirectly from Guest's use of and entrance upon Black Rock Retreat's facilities and premises. Releasor acknowledges and agrees that Releasees assume no responsibility for any liability, damage, or injury that may be caused by the negligent acts or omissions committed prior to, during, or after Guest's use of Black Rock Retreat's facilities, premises and participating in the Activity. By signing this agreement Releasor is giving up legal rights.

In signing this Waiver, Release, and Indemnification Agreement, I hereby acknowledge and represent that I have read this entire document, understand its terms and provision, understand it affects my legal rights individually and my legal rights as a parent/legal guardian, as well as the rights of the Minor, that it is a binding Agreement, and that I have signed it knowingly and voluntarily.

Name:	Signature:	Date:
Minors Name:	Minors Signature:	Date:

Dietary Allergies (Due 2 weeks before arrival)

Click here to fill out the Allergy Form

We want to serve your child well! If your child has an allergy or dietary need, we need you to tell us, by filling out this form.

The information submitted in this form will go directly to our food service department and they will be able to use the information to serve your child. This information will be used for food service purposes only.

If you'd like to check out the form and see what information we're asking for, please use the first and last name TEST.

Parents of students with food allergies are required to fill out the online form and submit it 2 weeks prior to your school's trip. If the form (which has an automatic date stamp) is not received two weeks prior to your arrival at Black Rock, we cannot make meal accommodations and parents will be required to send their own meals. If this were to happen there will be no food refunds given.

If you have any questions or concerns, please reach out to our food service director Pierce at pjohnson@brr.org

direct link to allergy form: https://forms.office.com/r/6QzvNvJ39y

What to Bring:

We can't wait to see you! As you start planning and packing, we have a few suggestions / tips for you.

- 1. Space is limited. Try to pack so that your luggage includes only a sleeping bag or bedroll and a small suitcase. (linens are NOT provided)
- 2. We will be outside. A lot. Please do **not** bring your new, expensive, or favorite clothes as we will be spending our time outside, sitting on the ground, and doing other outdoor activities where they will probably get dirty.
- 3. Temperatures may range from the 40's to the 90's. It is good to plan on wearing layers of clothing that can be added or taken off as the temperature changes. Check the weather for Quarryville PA.
- 4. Don't forget your rain gear! We hold classes outdoors, rain or shine!
- 5. Label your things. Black Rock Retreat is not responsible for lost or stolen items. Lost and found items after your schools' trip will be kept for 30 days. Items can be picked up or shipped after a check to cover costs is received.

Please do not bring snacks, candy/gum, smart watches, AirPods, cell phones, electronic games, weapons, or knives.

A packing list is on the next page!



Cloth	Clothes			
	Socks			
	Underwear			
	T-Shirts			
	Pants/shorts			
	Sweatshirt			
	Pajamas			
	Jacket/coat			
	Raincoat / poncho			
	Shoes for walking/hiking			
	Shoes for getting wet (must have a back strap)			





Linens			
	Sleeping bag or sheets & blanket		
	Pillow		
	Towel (maybe two)		

Toiletries				
	Towel and washcloth			
	Shampoo			
	Soap			
	Deodorant			
	Toothbrush & toothpaste			
	Comb or Brush			
	Sunscreen			
	Bug spray with tick repellent			

Misc.				
	Water Bottle			
	Flashlight			
	Bible			
	Hat or Bandana			
	Pen or Pencil			
	Backpack			



Student medications should be turned in to the school prior to the trip

Optional			
	Camera		
	Money for giftshop/ snack shop (your school will decide if the shops are open)		
	Shower flip flops		
	Gloves for gaga ball		

Behavior Expectations

During your time at Black Rock, we will all have more fun if we're respectful. Please be respectful of the following.

OTHERS

Listen to school leaders and Black Rock staff. Be kind to others. Treat others as you'd like to be treated.

CREATION

God has belssed us with an awesome place to have fun and learn. Let's take care of it.

SELF

God made you and is giving you the opportunity to have fun at camp. Take care of your mind and body while you're here.

GOD

You can learn a lot about God at camp. Make sure you're listening for His voice and try to get to know Him while you're here.

Consequenses of Disrespect

I have read and understand these guidelines and the consequenses of being disrespectful.

Strike	One -	warnin	g from	an adult.			
Strike	Two-	call ho	me and	tell them	you were	disrespe	ctful.
Strike	Three	- call h	ome an	d tell ther	n you can	't stay at	camp.

Name:	Signature:	