

ADULT MEDICAL CONSENT FORM



In order to comply with state and county laws we ask for the following Health History/Medical Consent Form to be completed and signed by each person attending Forward Bible Camp.

Please be aware that Forward Bible Camp does NOT provide medical or hospital insurance coverage.

Name (Please print): _____ Age: _____
DOB _____ Gender _____ Phone # _____
Address _____ City _____ State _____ Zip _____
Contact Email _____
Emergency Contact - _____ Relationship _____ Phone # _____

Medical Information: Forward Bible Camp requests this information in order to provide appropriate medical care in the event of your injury and/or illness while at camp. Forward Bible Camp is committed to protecting the confidentiality of this information.

Are all immunizations up to date? YES ___ NO ___

Date of last Tetanus Shot _____

Have you been exposed to any kind of Communicable Disease within the last 3 weeks ? YES ___ NO ___

If YES, please explain:

Please List ALL Allergies:

Drug _____
Insect / Plant _____
Food _____
Diet Restrictions _____

If you have serious dietary restrictions, please visit the camp kitchen to discuss the camp menus

All medications, except inhalers, must be in the original containers and given to the Camp Health Supervisor while you are at camp. Please give prescription information to the camp at registration.

PLEASE TURN OVER >>>

Rev. 09/2018

10321 Wentworth Springs Road, Georgetown CA 95634

530-333-4287

By signing this form I give my informed consent to the First Aid personnel assigned by Forward Bible Camp, Inc. who are certified in a minimum of CPR and First Aid by a nationally recognized provider in accordance with ACA standard HW-1 to provide basic First Aid and comfort measures through standardized camp treatment procedures which includes the use of over-the-counter medications.

I understand that it is my responsibility to make arrangements for greater health care needs than the First Aid personnel can provide within their individual certifications, licenses and scopes of practice.

I authorize Forward Bible Camp, Inc. to arrange for or provide any necessary, related transportation to the nearest medical facility for urgent or emergency medical treatment if indicated, and I do assume all responsibility for payment for such treatment.

I hereby give permission to the physician selected by Forward Bible Camp, Inc. to secure and administer any and all medical treatment deemed necessary, including hospitalization.

I authorize the use of the following generic, over-the-counter medications as directed by the labels provided by the manufacturer: analgesics, decongestants, antihistamines, cough suppressant and/or expectorants, throat lozenges or spray, anti-nausea/diarrhea, epi-pen, antacid, antibiotic ointment, hydrocortisone cream, burn cream, petroleum jelly, chapped skin/lip treatment, antiseptic skin and wound cleansers, ipecac, glucose, laxatives, electrolyte replacement fluids, analgesic balms and gels, with the exception of _____.
I understand that these are stocked and dispensed by the First Aid personnel free of charge as needed.

This completed form may be photocopied for trips away from Forward Bible Camp, Inc. properties.

I HAVE CAREFULLY READ THIS ENTIRE AGREEMENT AND UNDERSTAND ITS CONTENTS

Name (Please print): _____

Signature: _____ Date: _____

Dates of Camp _____

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**Adult
WAIVER AND RELEASE AGREEMENT**



Name (Please print): _____ Age: _____

Assumption of Risk: I understand, acknowledge, and accept that using Forward Bible Camp’s facilities, services, and/or equipment exposes me to risks of personal injury, death, and loss of or damage to property that are inherent in the activities that I will be undertaking while using Forward Bible Camp’s facilities, services, and/or equipment. I also acknowledge and understand that in order to participate in activities on Forward Bible Camp’s premises, I should be in good physical health. I willingly and voluntarily choose to participate in these activities in spite of these acknowledged risks and hereby assume all risk of injury; loss of life; and loss of or damage to property arising out of these activities while using Forward Bible Camp’s facilities, services, and/or equipment.

Waiver and Release: In consideration of Forward Bible Camp allowing access to and use of its facilities, services, and equipment, I expressly release and forever discharge Forward Bible Camp and its agents, officers, employees, shareholders, assigns, and owners from any and all liability or claims for personal injury, death, illness, or loss of or damage to personal property sustained while on Forward Bible Camp’ premises, whether related to the use of equipment, services, a result of negligent instruction or supervision, or making general use of the facilities; and regardless of whether such injuries or damages are caused by the active or passive negligence of Forward Bible Camp or its agents, officers, employees, shareholders, and owners. I expressly agree and understand that Forward Bible Camp, its agents, officers, employees, shareholders, assigns, and owners shall not be liable for any damages arising from personal injury or property damage arising out of entrance upon and use of Forward Bible Camp’s facilities, equipment, or participating in any camp activities.

Indemnification: I agree to fully indemnify, defend, and hold Forward Bible Camp, its agents, officers, employees, shareholders, assigns, and owners harmless from all liability, claims, demands, damages and causes of action related to person or property which may be brought against Forward Bible Camp by any individual or on their behalf for any damages, injuries or losses of any kind occurring as a result of use of Forward Bible Camp’s facilities and/or equipment, as long as Forward Bible Camp was not actively negligent. I also expressly agree to be responsible for and reimburse any and all attorneys’ fees and legal costs incurred by Forward Bible Camp as a result of having to defend any such action.

Photo Release: I understand that my photo may be taken at the camp and : I authorize use of photos or video taken at camp for promotional purposes.

I HAVE CAREFULLY READ THIS ENTIRE AGREEMENT AND UNDERSTAND ITS CONTENTS

Name (Please print): _____

Signature: _____ Date: _____

Dates of Camp _____