



The Churches of Saint Timothy and Saint Ignatius
Extreme Faith Camp (with Leadership Retreat) – June 6th-12th, 2020
Adult/Young Adult/Teen 18+ Registration
CONSENT FORM & INDEMNITY AGREEMENT

Adult Participant Name: _____

For which EFC Adult Leadership Team are you applying? (If you are unsure, leave blank)

- Teen 18+ Prayer Team/Extreme Team [Note: Please fill out the Teen Leader Application]
Dream Team (Leadership team of all college age young adults)
Adult Chaperone (Parents and other adults who serve as an adult presence at camp)
Camp Leadership Position: _____ (Prayer Team Lead, MC, nurse, etc.)

T-Shirt Size (Adult Sizes): XS / S / M / L / XL / XXL

Home Address: _____

E-mail Address: _____

Primary Phone: _____ Secondary Phone: _____

Date of Event: Saturday, June 6th–Friday, June 12th, 2020 (9am on Saturday; 4pm on Wednesday)

Type of Event: Extreme Faith Camp

Destination: Big Sandy Camp (52511 185th Pl, McGregor, MN 55760)

Adult Leader Cost: \$380 (\$100 deposit due w/ registration, final payments due May 1st)

Individuals in Charge: Baylyn Wagner & Ali Hunt

Drop-off/Pick-up Location: The Church of Saint Henry

Mode of Transportation to and From Event: Bus

I, _____, willingly participate in the above named activity and I warrant that I am in good health. In consideration of my participation, I agree to indemnify the Churches of Saint Timothy and Saint Ignatius, the Archdiocese of St. Paul & Minneapolis, and Big Sandy Camp from any claims or law suits brought against the Churches of Saint Timothy and Saint Ignatius, the Archdiocese of St. Paul & Minneapolis, and Big Sandy Camp by myself or other that arises out of any behavior by myself at the event/activity described above. I also agree to pay reasonable attorney’s fees or expenses incurred by the Churches of Saint Timothy and Saint Ignatius, the Archdiocese of St. Paul & Minneapolis, and Big Sandy Camp in defense of such a claim/suit. Should photos or video be taken, I give my permission for the use of my image and /or likeness in any promotional or other marketing activities relating to the youth ministry programs of the Churches of Saint Timothy and Saint Ignatius and Big Sandy Camp.

EMERGENCY MEDICAL TREATMENT: In the event of an emergency, I give permission to be transported to a hospital for medical treatment. I agree to receive emergency medical treatment at my expense at the discretion of the event sponsor. In the event of any emergency, please contact

Emergency Contact Name Relationship at Emergency Contact Phone Number

I agree to all of the above stated considerations and conditions.

Signature

Date