



18511 City Lake Rd
Canyon, TX 79015
PO Box 7709
Amarillo, TX 79114
hpretreatcenter.org
806.499.3429
a 501(c)(3) nonprofit facility

GENERAL RELEASE FORM

Participant's Name (please print): _____

Date of Birth: ____/____/____ Age: ____ T-Shirt Size: _____

Event attending: _____ Dates: _____

Parent/Guardian Name, if participant under 18 (please print): _____

Address City, State, Zip

Emergency Contact Cell Phone
Capable of receiving text messages

Email address

Other Phone Number (if applicable)

Medical Limitations/Allergies (food/medicines): _____

Current Medications with dosage and time to be taken: _____

***All Medications Must be in Original Containers*

Physician: _____ Required vaccinations are up to date: Yes No

Insurance Provider: _____ Phone: _____ Policy #: _____

MEDICAL

I authorize medical treatment as needed for this camper/child. It is understood that this authorization is given in advance of any specific diagnosis or treatment. I hereby waive all claims against and hold harmless the High Plains Retreat Center and its staff/leaders from any liability for any injuries received by this camper while at HPRC and/or participating in HPRC activities or programs.

FOR MEALS PROVIDED BY HPRC KITCHEN

[] REGULAR MENU [] SPECIAL DIET (choose all that apply): gluten-free dairy-free tree nut free other: _____

If you/your camper has food allergies, we are happy to accommodate. Special diets do require additional \$1 per meal.

If your group is providing their own meal, please coordinate with your group leader.

ASSUMPTION OF RISKS

Programs and activities at High Plains Retreat Center involves a variety of activities including games, group initiatives (physical and cognitive), ropes courses, 2-person giant swing, zip line, archery, riflery, swimming pool and other potentially rigorous physical/emotional activities. The inherent risks and other risks of this program may include falls, heat stroke, hypothermia, anxiety and other fear responses, elevated heart rates, collisions with objects or other people, unsafe acts by other participants, exposure to illnesses, acts of nature related to being in the outdoor venues, and other risks that may or may not be noted by participants and staff. Safety is an important priority in the facilitation and management of all levels of programming, however, even with the adherence to recognized risk management practices in adventure programming, accidents do occur. Participation in all of these activities and elements may result in injury, fatigue, psychological stress, or even death, not totally unlike other physically and emotionally demanding activities of various natures. The level of participation in our program is entirely voluntary and under individual choice at all times and for ALL aspects of the program or training. As with any program of this nature, there is a risk that must be assumed by each participant in the event that he/she may experience any emotional or physical injury or death. I recognize that there is a significant element of risk in any

adventure sport or activity associated with the outdoors. Knowing the risks, dangers, and rigors involved in the activities, I represent that I/my child exhibit(s) good health required for participating in the activities.

ILLNESS WARNING

An inherent risk of exposure to illness, including COVID-19, exists in any public place where people are present. While at HPRC and taking part in our programs, you voluntarily assume all risks related to exposure to illness including, but not limited to COVID-19.

VOLUNTARY RELEASE OF LIABILITY AND INDEMNITY

By signing this release form, I agree to release and hold harmless, High Plains Retreat Center or HPRC, its agents, assistants, employees, and officers, and directors (the "release parties") for any damage or injuries, physical or mental, including those caused in whole or in part by the negligence of any released party, which I might incur as a result of my voluntary decision to participate in HPRC programs and activities.

PARTICIPANT AGREEMENT INCLUDING ASSUMPTION OF RISKS AND VOLUNTARY RELEASE INDEMNITY

I further agree to indemnify the release parties and each of them from any claim brought by a third party, including a co-participant, for any injury or loss suffered by that person caused in whole or part by my conduct. This release is binding on my heirs and estate. I acknowledge that I have been given the opportunity to ask questions regarding any aspect of this release form and by signing in the space provided, do acknowledge that I have read completely and fully understand all aspects of this release from and agree to its terms in their entirety. I have been informed of the full nature of this program and its inherent risks and fully understand the nature of the program. I certify approval and represent that I/my child can participate in the physical requirements of challenge and recreational activities which involve potential injury and assume such risks. Knowing the risks, dangers, and rigors involved in the activities, I represent that I/my child exhibit(s) no signs of illness and exhibit good health required for attending this program and participating in the activities. I understand that participation in this program is by choice and that I/my child may exercise the option to NOT participate in any aspect of this program. I grant permission for High Plains Retreat Center personnel or event leadership to authorize any emergency medical care, operations and/or anesthesia which might become necessary.

EMERGENCY PREPAREDNESS PLANS

HPRC's Emergency Plan is available on our website: hpretreatcenter.org

A cell phone number is required in the event of an emergency. Standard text fees will apply. *In order to decline use of cell phone and opt for alternative communication in the event of an emergency, you must contact the director separately in writing stating alternate contact is required.*

If an extended power outage occurs, our established emergency policy requires that all guests vacate the premises if water service cannot be restored within 24 hours. This ensures the health and safety of all occupants and prevents any prolonged interruption of essential services.

FLOODPLAIN NOTICE (TEXAS YOUTH CAMP CODE)

Portions of the camp property used for daytime activities are located within a designated floodplain.

No sleeping cabins are located entirely within the floodplain.

One cabin porch borders the floodplain boundary; the sleeping structure is not within the floodplain. An emergency roof-access ladder is installed as required by Texas law.

I acknowledge receipt of this floodplain notice.

PHOTO AND MEDIA RELEASE

I grant High Plains Retreat Center and persons acting for or through them, the rights to use, reproduce, assign and/or distribute photographs, films, videos, and sound recordings of myself for use in marketing or educational materials they may create. *In order to decline the photo/media release, you must contact the director separately in writing stating the name of the individual declining.*

GENERAL

The camper listed has permission to participate in all activities including transportation and water activities, unless otherwise expressed in writing to the group leader and the HPRC staff. I understand that campers who do not cooperate with leaders or abide by camp rules may be asked to leave. Parents will be responsible for transportation and transportation costs if the camper is sent home.

I acknowledge availability/receipt of the Emergency Action Plan via hpretreatcenter.org

Participant Signature

Date

Signature of Parent/Guardian if participant under 18

Date