

Camp Whitewater, Inc. 39246 Mill St. Winona, MN 55987

CAMP WHITEWATER, INC. CONSENT AGREEMENT AND RELEASE FORM

I, the undersigned parent or guardian, hereby conse	ent to my child,	, participating
in Camp Whitewater youth camp operated by Cam		through
, 2018, and in activities co	onnected with this youth camp. Any med	ical conditions relevant to
my child have been noted by filling out the Confide	ntial Health Form and submitting said for	rm at registration.
I understand that Camp Whitewater Inc. does not p	•	d that any medical expenses
incurred on my child's behalf will be paid by either	my own medical insurance or me.	
I understand that my child may be sent home for a	-	-
of this camp that he/she is attending. Both guardia	n and camper must sign the Camper Disc	iplinary Form.
In the event an emergency occurs, I may be reached authorize either the Camp Director or his direct subare any activities I do not want my child to be involved.	oordinate to make emergency medical de	ecisions for my child. If there
I UNDERSTAND AND HEREBY AGREE TO ASSUME AL CAMP, INCLUDING ACTIVITIES PRELIMINARY AND S Inc., Winona, MN, and its agents and volunteers, ha expenses, and damages on account of injury to my connection with the youth camp or participation in	UBSEQUENT THERETO. I do hereby agree armless from any and all liability, actions, child or property which I now have or wh	e to hold Camp Whitewater causes of actions, claims,
I expressly agree that this release, waiver, and inde by law of the State of Minnesota and that if any po notwithstanding, continue in full force and effect. Thereto and the terms of this release are contractual further state the I HAVE CAREFULLY READ THE FO SIGN THIS RELEASE AS MY OWN FREE ACT. This is a	ortion thereof is held invalid, it is agreed to this release contains the entire agreemend and not a mere recital. **DREGOING RELEASE AND KNOW THE COM**	that the balance shall, at between the parties
Signature – parent or legal guardian only	Date	
EMEI	RGENCY INFORMATION	
Father's Cell/Work Phone ()	Mother's Cell/Work Phone (.)
Alternate: if neither can be reached: Name:	Phone # ()	