

PARTICIPANT PERMISSION FORM

Pa	Participant Name (Print)	
Da	Date(s) of Program <i>MM/DD/YY</i> Na	ame of Program
1.	 Parent/Guardian Consent I hereby certify that I give permission Lutherdale; be transported to and from all camp activities, emerge Lutherdale grounds, except as noted. 	
	Exceptions	Initials
2.	Camp Activities I give permission for my child to participate in the Eagle's Nest Adventure Center at Lutherdale. This includes the low challenge course, high challenge course, climbing tower, zip line, archery, and waterfront activities.	
	Exceptions	Initials
3.	3. Media Release I give my permission for photographs and/or video Lutherdale promotional materials (print publications, website, and identifying information to any pictures of participants posted in our written documentation of guardian permission on file.	social media). Lutherdale will not include names or
4.	 Liability Release In consideration of acceptance to Lutherdale Bi Bible Camp, its owners, agents, associates, and staff from any an contagious conditions such as COVID-19, or illness sustained by 	d all liability, claims, damage, injury, exposure to
5.	Exposure Notification I will notify the Camp Office (262) 742-2342 if I become aware that my child was exposed to or may have contracted a contagious condition prior to arriving at Lutherdale or up to 7 days after departing Lutherdale.	
	Luti lei dale.	Initials
Pa	Parent/Guardian Full Name (Print)	
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Pa	Parent/Guardian Signature	Date MM/DD/YY