



Ruggles Camp & Retreat Center

Ruggles Camp and Retreat Center Commitment Form

I, _____, as a camper at Ruggles Youth camp commit myself to camp this week. I understand that I must stay here the entire time and can only leave if there is a family emergency. I also will let my family, parents, and friends know that they can only visit after the tabernacle services each night from approximately from 8:30 pm-8:45 pm (or 15 minutes after the tabernacle service). I understand what items are not allowed at camp. I also will respect the camp staff by my word and conduct.

I, _____, the parent /guardian of the camper have read the rules regarding my child's commitment for camp during this week and will honor that commitment. I also understand what my child is allowed and not allowed to bring to camp. I understand my child may be sent home should his/her conduct negatively affect the other campers.

Parent/Guardian Signature _____

Camper's Signature _____

Ruggles Camp and Retreat Center Medical Release Form

Important: Restrictions (Diet, medicine, etc.) _____

Do Not release my child to: _____

I give permission and consent for my child to participate in any and all camp activities, which could include hiking, games and rope courses, and off site activities, which may include transportation, without limitations. I certify that my child is in good physical condition for all camp activities. I understand that the nature of outdoor camping ministries can include some risk of injury. I agree to submit my insurance claims to my insurance first and will only use Ruggles' insurance plan if needed. I give my permission for the use of photographs or videos including my child in camp publicity and for the distribution of my child's mailing address to other camp mates if requested. In case of emergency, I hereby give permission to the selected physician selected by the Camp Director or Dean to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child, as named above.

Camper's signature _____ Date _____

Parent's/Guardian signature _____ Date _____