



# HIGHLAND LAKES CAMP & CONFERENCE CENTER

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**PLEASE COMPLETE FORM AND RETURN TO YOUR GROUP CONTACT PERSON. DO NOT MAIL TO HLCCC.**

## STUDENT MEDICAL / LIABILITY RELEASE FORM

**INSTRUCTIONS:** Complete the Registration form in its entirety. Parent or legal guardian signature is required on both front and reverse side. Type or print legibly in Dark Ink. **The COMPLETED Medical/Liability Release form is a REQUIRED document authorizing entrance to HLCCC property and participation in camp activities. Upon arrival, the completed form must be delivered to HLCCC administrators. Texas Law requires that the completed original medical form be kept in the Campus Nurses' Station and become a document of permanent HLCCC record.**

DATE: \_\_\_/\_\_\_/\_\_\_

Camper's Name: \_\_\_\_\_  
                            First                            Middle                            Last                            (indicate name used)

Address: \_\_\_\_\_  
                            Street  City  State  Zip

Birth Date: \_\_\_/\_\_\_/\_\_\_      Age: \_\_\_      Gender: (M/F) \_\_\_      Email: \_\_\_\_\_  
                            Mo.      Day      Year

Phone Number: Daytime (\_\_\_\_\_) \_\_\_\_\_      Evening (\_\_\_\_\_) \_\_\_\_\_      Other (\_\_\_\_\_) \_\_\_\_\_

Name of Church or Group with whom you are attending: \_\_\_\_\_      City: \_\_\_\_\_      State: \_\_\_\_\_

Have you been convicted of a felony:  YES  NO      If yes, explain: \_\_\_\_\_

Parent / Legal Guardian: \_\_\_\_\_      Relationship to You: \_\_\_\_\_

Parent / Legal Guardian Phone Number: Daytime (\_\_\_\_\_) \_\_\_\_\_      Evening (\_\_\_\_\_) \_\_\_\_\_      Other (\_\_\_\_\_) \_\_\_\_\_

### MEDICAL INFORMATION

In the event of an accident or special health needs, it will be necessary for us to have the requested information. Please make certain that you have provided thorough and accurate medical information.

<p>Medications you take for current medical condition (asthma, allergies, etc.) _____</p> <p>Medications you take occasionally (headaches, etc.) _____</p> <p>Do you plan to bring these or any other medications to camp with you? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><i>State law requires all medications to be placed in the campus Health Center. All medications must be brought in the original bottle (prescription or over-the counter), properly labeled as prescribed by law.</i></p>	<p>Health Information: Do you have, or have you had</p> <p>Recent Serious Injury?      <input type="checkbox"/> YES      <input type="checkbox"/> NO</p> <p>Recent Surgery?      <input type="checkbox"/> YES      <input type="checkbox"/> NO</p> <p>Chronic Medical Condition?      <input type="checkbox"/> YES      <input type="checkbox"/> NO</p> <p>Other Health Concerns?      <input type="checkbox"/> YES      <input type="checkbox"/> NO</p> <p>If YES to any of the above, please describe: _____</p> <p>Special Diet? _____</p> <p>Date of last Tetanus Shot? _____      Immunizations Current? _____</p> <p>Allergies:    Food? _____      Drugs? _____</p> <p>Insect Stings/Bites? _____      Other? _____</p>
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Person to Notify in **Event of Emergency**: \_\_\_\_\_      Relationship to You: \_\_\_\_\_

Phone Number of Contact Person: Daytime (\_\_\_\_\_) \_\_\_\_\_      Evening (\_\_\_\_\_) \_\_\_\_\_      Other (\_\_\_\_\_) \_\_\_\_\_

Family Physician: \_\_\_\_\_      Phone: (\_\_\_\_\_) \_\_\_\_\_

Medical Insurance Co.: \_\_\_\_\_      Plan or Group #: \_\_\_\_\_

Insured ID or Member #: \_\_\_\_\_      Ins. Co. Phone #: (\_\_\_\_\_) \_\_\_\_\_

*It is recommended that you attach a photocopy of your family medical insurance card.*

I, \_\_\_\_\_ being the legal guardian of \_\_\_\_\_ give my permission to Highland Lakes Camp and Conference Center's management, medical staff, and/or the group director to provide medical treatment that may be deemed necessary to insure the well-being of the named student. I, the undersigned, do hereby verify that the above information is correct and I do hereby release and forever discharge all from any and all claims, demands, actions or cause of action arising out of damage or injury while participating in Highland Lakes Camp sponsored activities.

X \_\_\_\_\_      \_\_\_/\_\_\_/\_\_\_      (\_\_\_\_\_) \_\_\_\_\_  
Required Parent or Legal Guardian Signature      Date      Phone Number

**IMPORTANT... SEE REVERSE SIDE FOR MANDATORY STUDENT AND PARENTAL RELEASE**



## AGREEMENT TO ATTEND, PARTICIPATE, ASSUMPTION OF RISK AND RELEASE OF LIABILITY

HIGHLAND LAKES BAPTIST ENCAMPMENT d/b/a HIGHLAND LAKES CAMP & CONFERENCE CENTER hereinafter referred to as the "Camp" requires a signature for all attendees of the Camp and all participants of any Camp activity including, but not limited to, Challenge/Ropes Course (highs and lows), Water Crafts, Water Toys, Swimming Pool, Bicycle Course, Backpacking, Camping, Basketball, Football, Baseball, Softball, Volleyball, and any and all other camp and recreational sports and activities. Furthermore this form releases the Camp to photograph and/or use photographs of myself or my child for use in its publications, advertising, promotional purposes, internet, and/or visual presentations which inform people of the services and activities of Camp. The signature provided confirms Agreement to Attend, Participate, Assumption of Risk, and Release Form in order to attend Camp and to participate in any Camp activity.

Attendance and Activities at Camp may include warm-ups, games, group initiative problems, high and low challenge course, and/or other rigorous physical adventure activities as well as exposure to the elements, exposure to animals, snakes and insects. Camp takes all reasonable precautions to ensure you a safe and enjoyable experience. Parts of the experience, by their nature, can be physically demanding and include varying levels of stress and anxiety, not all of which can be foreseen. The decision to attend the Camp and the decision to participate in any Camp activity at any level **IS AT ALL TIMES COMPLETELY UP TO THE INDIVIDUAL'S CHOICE** and, if there is attendance at the Camp and participation at any level of any Camp activity, there is a risk, which must be assumed by each attendee and by each participant. Although it is the Camp's goal to maintain the physical, emotional and social safety of each attendee and participant of the Camp, the physical, emotional and social risks must be assumed by each attendee and participant.

"I understand that attendance at the Camp and participation in any Camp activity may be physically and emotionally demanding. I recognize the inherent risk of physical and/or emotional injury of attending Camp and participating in any and/or all Camp activities. I understand that each participant must assume the risk of any injury, physical and/or emotional, and any financial responsibility that could result from attending Camp and participating in any Camp Activity. **I agree to assume such risks and such responsibility. I, on my behalf, and on behalf of my heirs and assigns, hereby release, indemnify and hold harmless Highland Lakes Baptist Encampment d/b/a Highland Lakes Camp and Conference Center from any and all claims, physical and emotional, including bodily injury, that I may have that may be sustained in connection with my attending Camp and with my participation in any and/or all Camp activities.**"

If you feel that there are any activities in which you or your child should not be involved in, please describe for us on an attached sheet the activities (include name and church/group name on the attached sheet). I understand the directors of Highland Lakes Baptist Encampment reserve the right to dismiss, without refund, any camper whose influence is detrimental to the operation of the camp, as determined by the discretion of the directors. I understand that the use of alcohol, tobacco products, and illegal drugs is strictly prohibited at all Highland Lakes Baptist Encampment programs.

I have read (or had read to me) this complete document and I understand the information contained herein. I have freely and voluntarily signed this document.

**X** \_\_\_\_\_  
Required Student Camper's Signature      Date

**X** \_\_\_\_\_  
Required Parent or Legal Guardian Signature      Date  
(If Student Camper is 18 years of age or younger)

### CAMP RULES

1. All medications are to be listed on the Registration/Medical Release form and taken to the Health Center and registered with the HLC medical staff. All medications must be in original bottle and/or container. Medications will be administered as per RX label instructions and dosage, unless written, signed, and dated parental instructions state otherwise. Students are not to share any medications, including over-the-counter medications.
2. Campers who are ill or injured must be either in the HLC camp office, medical clinic, or hospital. In the event of illness or injury, students will not be permitted to remain in their dorm rooms.
3. Prank supplies are not allowed in the dorms (i.e. shaving cream, body paint, water balloons, water guns/blasters). There are no exceptions.
4. Adult supervision is required at the lake and/or pool. At no time is a student to go to the lake and/or pool without adult supervision. Lifejackets are required for lakefront activities, regardless of a person's age or water safety ability.
5. Drugs, alcohol, any form of tobacco, firearms, knives, or any kind of weapon, or fireworks are NOT allowed.
6. Campers are expected to reflect a Christian example by their dress. Shorts can be worn to worship but must be longer than the arm and hand when extended down the side of the person. Modest skirts and dresses are acceptable in worship, and jeans are always acceptable. Immodest shorts or tops, spaghetti strap tops, distasteful designs or messages, cheer shorts and other extreme clothes are not acceptable at any time. Only one-piece swimsuits or tankinis that cover more than 80% of the stomach are allowed. Bikinis, French cut or one piece resembling two-piece swimwear will require a dark colored t-shirt to be worn over them. Campers may be asked to change their attire if an adult feels their dress is inappropriate.
7. Refrain from Public Display of Affection with others.
8. Under NO circumstances are girls to be in guys rooms or guys in girls rooms.
9. No fighting is allowed.
10. Students are to respect all adult leaders and follow their instructions. All adults—members of HLC leadership team, church leadership teams, and adult volunteers—are in places of authority over all students. They have been trained in how to guide students for each particular event.
11. Everyone must attend all scheduled events. If your group is in an activity, whether in the classroom or on the athletic field, you must be with them. There are no exceptions to this unless you are injured or sick and are at the HLC Health Center, doctor's office or hospital.
12. Campers MUST be in the dorm by designated camp curfew. Your curfew is for your security and for your mental and physical well-being.
13. Campers must wear nametags at all times. Each Journey Youth Camp participant will be issued a nametag upon arrival, which is to be worn during all meals, and other activities during the day.
14. Guests are not allowed to bring pets on campus. No pets in the dorms, motels, or meeting rooms.