

**Christmas with orphans**

**the icaf 2015 winter camp In uganda**

**December 20th to 30th**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Camper’s Full Name** **Date of Birth**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Street Address

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City Zip Code State/Country

E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of High School, College or University

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent’s/Guardian’s Full Name**

E-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Camper has these medical conditions or health concerns: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Camper is allergic to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Camper has these dietary restrictions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Consents, Releases and Waiver of Liability Agreement

1. The Undersigned Camper and Parent/Guardian warrant and represent to the International Child Art Foundation (ICAF) that they are legally authorized to enter into this Consents, Releases and Waiver of Liability Agreement (hereinafter “Agreement”).
2. The Undersigned understand that the ICAF cannot and does not assume responsibility for any personal or other injuries to the Camper in connection with the Camp. The Undersigned assure the ICAF that they have consulted with a medical doctor and there are no health-related reasons or problems which preclude or restrict the Camper’s participation in the Camp. The Undersigned agree to assume all the risks and responsibilities surrounding the Camper’s participation in the Camp, and in advance do hereby release, and forever discharge, waive and covenant not to sue the ICAF or its camp counselors (hereinafter including officers, agents, employees, partners and volunteers) from and against any and all liability for any harm, injury, damage, claims, demands, actions, causes of action, costs, and expenses of any nature whatsoever arising out of or related to any loss, damage, or injury that may be sustained by the Camper or by any property belonging to the Camper, whether caused by the negligence or carelessness of the ICAF or camp counselors, or otherwise, while in, on, upon, or in transit to or from the locations where the Camp activities or any adjunct to these activities occurs or is being conducted. The Undersigned understand and agree that the ICAF does not have medical personnel available at the location of the Camp or related activities. The Undersigned understand and agree that the ICAF and its camp counselors are granted permission to administer first aid or arrange emergency medical treatment, if necessary, and that the ICAF assumes no responsibility for any injury or damage which might arise out of or in connection with such first aid or emergency medical treatment. The Undersigned also agree that they will be financially responsible for any expenses incurred as a result of any emergency medical treatment.
3. The Undersigned understand and agree that in order to participate in the Camp, the Camper must abide by the rules and codes of conduct established by the ICAF and its camp counselors. The ICAF reserves the right to dismiss the Camper due to the Camper’s repeated disruptions of the Camp program, including but not limited to verbal and physical aggression against the camp counselors or other campers, failure to follow safety or program instructions, and any other disruptive behavior. The Undersigned understand that if the Camper is dismissed from the Camp there will be no refund for any unused portion of the pre-paid camp fee and no aid or reimbursement if new airline tickets are to be purchased.
4. The Undersigned understand that the ICAF will determine the final schedule for the Camp and that the schedule may be somewhat different than the published schedule.
5. The Undersigned understand that the Camper can photograph or film at the ICAF Winter Camp only at the discretion of the camp counselor and that any publication of these photographs or films must clearly state: “Christmas with Orphans: The ICAF 2015 Winter Camp in Uganda”.
6. The Undersigned grant permission to the ICAF to use for its promotional purposes during and after the ICAF Winter Camp: (a) photographs, artistic renderings and audio-video footage of the Camper; and (b) quotations about the Camp provided by the Camper.
7. The Undersigned agree to indemnify and to hold the ICAF, its directors, officers, camp counselors, staff, partners and volunteers harmless against any and all claims or actions for injury, damage, loss, accident, expenses or costs (including legal fees) that may arise out of or in connection to the Camp or this Agreement.
8. The Undersigned agree that one-half of the Camp fee of US$2,200 per Camper paid upon registration is nonrefundable, and that the remaining one-half payment must be received by the ICAF on or before December 1, 2015.
9. This Undersigned agree that this Agreement shall be governed by the laws of the District of Columbia in the United States.

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Camper’s Signature Date

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Parent’s Signature Date