EAGLES' WINGS YOUTH RANCH

P.O. Box 465 Mountainair, NM 87036 Phone: (505) 847-0062 Fax: (505) 847-0644 E-mail: info@ewyouthranch.org Webpage: http://ewyouthranch.org

First Time Camper Application

Adventure Camp is a **FREE** summer camp for youth ages 10-12. Most camps begin on Monday at 2:30PM and end at 10:30 AM on Friday. All campers will be contacted as to dates, times, transportation and items to bring. **The entire application (front & back) must be filled out to be accepted for this program.**

Camper's Name		Age	Gender	
Birthday	Present School Grade	Ethnicity		
Physical Address	City	State	ZIP	
Mailing Address	City	State	ZIP	
County	Yearly Inc	ome for Household		
Home Phone	Cell Phone	Other Phone		
E-mail Address(es): Parent		; A		
E-mail Address(es): Camper				
Parent/Guardian 1 Name			1	
Parent/Guardian 2 Name				
Emergency Contact(Other than parent/guardian)	E	nergency Phone		
Please circle camper's AD	ULT T-Shirt size: sma	ll medium	large	X-large
Trease en ele camper 374D	OLT I-Shift Size. Sind	in meanum		0
MEDICATION TAKEN: MEDICAL PROBLEMS:			Be	
MEDICATION TAKEN:				
MEDICATION TAKEN: MEDICAL PROBLEMS:	important when participating	; in physical activitie	25:	
MEDICATION TAKEN: MEDICAL PROBLEMS: OTHER INFO, which might be	important when participating filled out by teacher, cou	in physical activition	es: referral so	urce only:
MEDICATION TAKEN: MEDICAL PROBLEMS: OTHER INFO, which might be The following box is to be	important when participating filled out by teacher, cou	in physical activition	es: referral so	urce only:

YOUR IMMEDIATE RESPONSE IS REQUIRED TO SECURE A RESERVATION FOR YOUR YOUTH. PLEASE FILL OUT AND RETURN TO THE ABOVE ADDRESS OR YOUR REFERRAL SOURCE ASAP.

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Camp and Challenge Course Assumption of Risk (Must be mailed or faxed with signature.)

Participant's Name (please print)

The Eagles' Wings includes adventure recreation, archery, horsemanship, swimming, campouts, challenge course, and other activities that include risk. The Challenge Course was constructed according to nationally recognized industry standards and is inspected annually. The course is certified and trained instructors operate it. Every effort is made for the safety and protection of each person from injury. Participation in all activities is by choice of the participant. In the event of an accident or illness, Eagles' Wings will make every effort to provide first aid and, if needed, arrange transportation to medical facilities. A camper may be dismissed or asked to leave if they bring guns, knives, drugs, alcohol, or any other weapon or harmful substance with them. Participant's bags, jackets, pockets, person etc. will be checked upon arrival, or when necessary, to insure we keep them, staff, and others safe. A camper will be dismissed if they act in ways that are harmful to themselves and others or refuse to cooperate in the ranch program.

I am aware that during the above person's participation in the Eagles' Wings program certain risks and dangers do exist. These include, but are not limited to, the hazards of being in a rural setting, the forces of nature, acts of God, and those existing because of the content of the program. In consideration of these activities and environment, I have, and do hereby assume all risks associated with participation in the program and will hold harmless the staff and directors of Eagles' Wings, from any and all liability, actions, cause of action, debts, claims, and demands of every kind and nature whatsoever, which I now have or which may arise from, or in connection with this person's participation in any activities arranged for him or her by Eagles' Wings and its staff. The terms hereof shall serve as a RELEASE AND ASSUMPTION OF RISK for heirs, executors, and administrators, and for all members of this person's family.

I understand all of the above and show agreement by my signature below. I also with my signature below authorize the camp to act in my behalf in any emergency situation.

Signature of parent/guardian

Date

By my signature above I also acknowledge Eagles' Wings is a Christian based organization. I have explained to my child that he/she is not required to participate in any activity that would make him/her feel uncomfortable.

Unless otherwise specified in this box, my signature above also permits Eagles' Wings to use a picture or likeness of my child in promotional materials.