



H. E. BUTT FOUNDATION

**OUTDOOR
SCHOOL**

SCHOOL INFORMATION

GROUP LEADER INFORMATION

ARRIVAL AND DEPARTURE DATES:

GROUP LEADER NAME:

EMAIL ADDRESS:

WORK PHONE:

MOBILE PHONE:

HOME PHONE:

CAMPSITE:

GRADE(S) OF CAMPERS:

NUMBER OF CAMPERS:

NUMBER OF STAFF:

TOTAL NUMBER:

PERCENTAGE OF CAMPERS WHO QUALIFY FOR FREE OR REDUCED LUNCH:

SCHOOL INFORMATION

LEGAL NAME OF SCHOOL:

PHONE:

ADDRESS:

CITY:

STATE:

ZIP:

ADMINISTRATOR NAME:

PHONE:

EMAIL ADDRESS:

NAME OF EMERGENCY CONTACT (*not attending camp*):

WORK PHONE:

MOBILE PHONE:

HOME PHONE:

EMAIL ADDRESS:

STAFF CERTIFICATION REGISTER

MEDICAL STAFF NAME:

COPY OF LICENSE:

MEDICAL STAFF NAME:

COPY OF LICENSE:

LIFEGUARD STAFF NAME:

COPY OF CERTIFICATION:

LIFEGUARD STAFF NAME:

COPY OF CERTIFICATION:



WAIVER, FULL RELEASE & INDEMNITY AGREEMENT

I understand that a first aid provider must be on-site at all times during our camp stay; OUTDOOR SCHOOL does not supply first aid providers. At a minimum, a person with an American Red Cross Community First Aid and Safety Certificate or equivalent (Community First Aid, CPR, AED) must be with our group at all times. Copy of current license or certificate must be submitted to Outdoor School staff at least two weeks before our arrival.

I understand that our group must provide our own lifeguards; Outdoor School does not provide lifeguards. All waterfront activities must be attended and supervised by an adult (18 years old or older) who holds a current American Red Cross Lifeguard certification or its equivalent. A minimum of one certified lifeguard per 20 swimmers is required. Copy of current certificate must be submitted to Outdoor School staff at least two weeks before our arrival.

I understand that we must provide proof of school district commercial general liability insurance to \$1 million. (This documentation is available through your central office administration). Proof of school district insurance must be faxed or mailed to Outdoor School staff at least two weeks before our arrival.

I understand that a school administrator must sign an Indemnity Agreement before our group participates in Outdoor School. Agreements must be signed and submitted to Outdoor School staff at least two weeks before our arrival.

I understand that all students, faculty, administrators, and volunteers who participate in Outdoor School will be required to submit (1) a Waiver or Parent Waiver form and (2) a Health History form. Forms must be completed, signed, and submitted to Outdoor School staff upon arrival.

I understand that for the safety and well-being of all participants, Outdoor School encourages all adult attendees to complete abuse awareness training. This training only takes a matter of minutes and provides valuable insight in maintaining the highest standards for student safety. One available source for this training is easily accessed through the Boy Scouts of America website: www.myscouting.org.

I understand that schools are responsible for conducting background checks for each of their adult volunteers.

The Undersigned voluntarily and knowingly signs this Agreement in consideration for H. E. Butt Foundation (Foundation) allowing the Undersigned to enter upon its property and participate in various activities and services provided by Foundation. The Undersigned acknowledges that this Agreement is a binding legal document and that the Undersigned has had the opportunity to seek advice from a professional of Undersigned's choice. The Undersigned does not rely on any legal advice or representation from or by the Foundation or its agents.

The term "Undersigned" will mean that person with legal authority to waive and release the rights and remedies of the individuals entering on the Foundation's property and participating in any activities, or receiving the any service provided by the Foundation or its Agents. The term "Foundation" means H. E. Butt Foundation, any of its related entities and any of their respective agents.

The Undersigned agrees to PROTECT, DEFEND, INDEMNIFY, AND SAVE H. E. Butt Foundation, its members, trustees, officers, employees, agents, and representatives (the Foundation) harmless from and against any and all claims, demands, causes of action of every kind and character, losses, costs, expenses (including attorneys' fees), and damages of every kind and character, without limit and without regard to the cause or causes thereof, or the negligence of any party or parties, including the negligence of the foundation whether such negligence be sole, joint, or concurrent for injury, illness, or death of any person or damage to any property arising out of activities of or in connection with the use of H. E. Butt Foundation camp facilities located near Leahey, Texas, by Permittee, its trustees, directors, officers, pastors, members, employees, guests, campers, and any other person associated therewith.

It is the express intention of the parties hereto, both the Foundation and the Undersigned, that under the indemnity provided by the immediately preceding paragraph, the Undersigned shall indemnify and protect the Foundation from the consequence of the Foundation's real or alleged negligence.

The Undersigned agrees that this Agreement will be governed by the Laws of Texas and by no other jurisdiction whatsoever. Also, the Undersigned waives any jurisdiction and venue other than a Texas State District Court in Kerr County, Texas.

H. E. BUTT FOUNDATION CAMPS GUIDELINES: We, (the Permittee), understand and agree to comply with the Camping Guidelines of H. E. Butt Foundation Camps for the use of their facilities as explained online (foundationcamps.org/apply, select "camp guidelines").

The Undersigned will not consume alcohol, controlled substances or misuse prescription drugs while on Foundation property or while participating in activities or services provided by Foundation.

TEXAS DEPARTMENT OF HEALTH REQUIREMENTS: We, (the Permittee), agree to comply with the requirements of the Texas Department of Health as listed in the Camping Guidelines and explained online: <http://www.dshs.state.tx.us/youthcamp>.

SIGNATURE:	DATE:
PRINTED NAME:	TITLE: