

CAMP HOPE EXPECTATIONS & AGREEMENTS

Camp Hope is a week-long Catholic youth camp focused on summer fun, deep friendships, and an ever-growing relationship with Jesus Christ and His Church. Fun, games and activities are important but the focus of this camp centers around seeking to draw closer to the Lord.

With this in mind, the following points outline agreements & expectations for campers & volunteers:

- All campers and volunteers are expected to participate fully in Camp Hope activities and reflect Christian attitudes in thoughts, actions and words.
- Campers or volunteers who find themselves unable to live out this agreement may be asked to return home.
- Serious behavioral incidents or issues that take place at camp will be quickly and clearly communicated to parents by a pastoral team member.
- Any breach of our Camp policies and procedures by a camper or volunteer may result in their swift removal from Camp Hope. In the case of a camper infraction, parents would be called in to remove their child, whether the parent agrees with the determination or not. The discretion and judgment of the Camp Director must be recognized as Camp policy.
- The Camp Director retains the right to ask anyone to leave at any time.

By signing below, I certify the following:

- I have read and understand the above statement of expectations for my child to attend Camp Hope.
- My child also understands these expectations and agrees to abide by all camp policies and guidelines.
- I understand that should my child choose not to follow these policies and conduct guidelines during camp, it could result in their dismissal from camp. I realize that it is the responsibility of the Camp Hope Directors to make this type of decision and that I would be responsible for supporting & respecting such a decision.

LIABILITY RELEASE

I request that I [my son(s)/daughter(s)] _____ (names of participants) participate in Camp Hope in Tunkhannock, PA. I acknowledge that Camp Hope in Tunkhannock, PA may entail games, recreational sports and other activities associated with a sleep away camp. The physical involvement associated with a sleep away camp includes the risks of injury through participation in indoor, outdoor, field and/or water-based games, challenges and activities. Common activities at Camp Hope are swimming, slip & slide, field games, archery, boating, fishing, hiking, bonfire, shooting of BBs, baseball, basketball, and Gaga. I acknowledge that there are inherent risks in these and other activities associated with a sleep away camp. I specifically waive any and all claims of any nature I may have arising out of Camp Hope, in connection with the above-described activities, that may be derived from any accident or injury I [my son(s)/daughter(s)] may sustain en route to, during, and/or returning from the activity.

I acknowledge the contagious nature of COVID-19 and that there are risks of infection by participating in a camp such as Camp Hope, and that these risks extend to my child and any other person who comes in contact with my child. I further acknowledge that Camp Hope cannot guarantee that I / my child will not become infected with COVID-19, or that anyone else who comes in contact with myself / my child will not become infected with COVID-19. I understand that the risk of becoming exposed to and/or infected by COVID-19 may result from the actions, omissions, negligence, or gross negligence of Camp Hope, other campers, or their

families. I acknowledge that the measures being put in place by Camp Hope will be implemented to the best of their ability but understand they may not be strictly followed at all times by all individuals.

I agree on behalf of myself, my child, and any other parent/guardian, to comply with all COVID-19 Protocols communicated. I agree on behalf of myself, my child, and any other parent/guardian, to inform Camp Hope if COVID-19 symptoms or diagnosis is experienced by myself, my child, anyone in his/her household, or anyone with whom there has been close contact during the camp week or within 14 days thereafter. In the event that I, my child, anyone in his/her household, or anyone with whom there has been close contact experiences COVID-19 symptoms or diagnosis during this time frame I hereby authorize Camp Hope to disclose such information to other campers and their parents/guardians without regard to the protections afforded under the Health Insurance Portability and Accountability Act (HIPPA) or any other similar law.

I consent to [my son(s)/daughter(s)] being transported by Camp Hope in the event of a field trip in compliance with the child protection policies of Camp Hope.

_____ Date _____

Parent/Guardian/Volunteer Signature

Parent/Guardian/Volunteer Printed Name