

**FOR YOUTH NOT ACCOMPANIED BY HIS/HER OWN PARENT**



**MUSTANG ISLAND FAMILY CAMP**

Mustang Island Conference Center Release Agreement 2009

**~ For Youth Not Accompanied by His/Her Own Parent ~**

Dear Parents and Guardians,

**Welcome to Mustang Island Family Camp!!**

We at Mustang Island Family Camp want to inform you of our safety precautions at Mustang Island. We at the Mustang Island Conference Center want you to realize that any outdoor recreational activity has inherent dangers that no amount of care, caution, instruction or expertise can totally eliminate.

IT IS IMPORTANT THAT THIS FORM IS FILLED OUT, SIGNED AND DATED BY THE PARENT OR GUARDIAN OF THE CAMPER AND MAILED TO: Mustang Island Conference Center, Family Camp, P.O. Box 130, Port Aransas, TX 78373.

**YOUR CAMPER WILL NOT BE PERMITTED TO ATTEND CAMP UNLESS WE HAVE RECEIVED THIS FORM.**

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- In signing this document, I hereby certify that I give permission to my son or daughter to participate in the camping program at Mustang Island Conference Center.
- I understand that pictures and videos are taken at the conference center. I hereby give permission for the use of such pictures and videos of my camper for the promotion of Mustang Island Family Camp.
- In addition, I give permission for my son or daughter to be transported in vehicles for camp approved transportation and activities at the Mustang Island Conference Center as well as transportation to and from medical facilities, if needed.
- I hereby give permission to Mustang Island Conference Center to provide routine health care, administer prescribed medications, and seek emergency medical treatment including ordering x-rays or routine tests. I agree to the release of any records necessary for insurance purposes. I give permission to Mustang Island Conference Center to arrange necessary related transportation for me/my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp director to secure and administer treatment, including hospitalization, for the person named above. This completed form may be photocopied for trips out of camp.
- I hereby give permission for my camper's belongings to be searched, with my camper present, when the Mustang Island Staff deem it necessary to protect the health, well-being, or safety of my camper or others.
- I understand that the terms herein are contractual and not a mere recital.
- I have signed this document as my own free act and in consideration of the agreement by Mustang Island Conference Center to accept my camper for the camp program chosen.
- I HEREBY AGREE BY EXECUTION OF THIS DOCUMENT TO RELEASE MUSTANG ISLAND CONFERENCE CENTER, THE STAFF, THE BOARD OF DIRECTORS, THE DIOCESE OF WEST TEXAS, AND ALL OTHERS ACTING FOR OR ON BEHALF OF MUSTANG ISLAND CONFERENCE CENTER FROM ALL LIABILITY WHATSOEVER, FOR PERSONAL INJURY, OR INJURIES TO PROPERTY, REAL OR PERSONAL, CAUSED BY, OR ARISING OUT OF CAMPING AND OTHER ACTIVITIES SPONSORED BY MUSTANG ISLAND FAMILY CAMP.

Camper's Name (PRINT) \_\_\_\_\_ SESSION # \_\_\_\_\_ Session Date \_\_\_\_\_

Parent/Guardian (SIGNATURE) \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Name (PRINT) \_\_\_\_\_