

# 2.10 Camp "Base Camp"

(grades 6-12)

July 8-12, 2019

Student's Name \_\_\_\_\_ Grade (for year of 2018-19) \_\_\_\_\_

Date \_\_\_\_\_

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## Activity Participation Agreement

**Name OF SPONSORING ORGANIZATION:** First Baptist Church of Lewisville

**ADDRESS:** 1251 W. Valley Ridge Blvd. Lewisville, TX 75077 **PHONE:** 972.436.5502

**DESCRIPTION OF ACTIVITY:** 2.10 Camp "Base Camp"

**WHERE:** Timberline Baptist Camp– Lindale, Texas

**WHEN:** July 8-12, 2019

Students will be traveling to Camp via buses. **While there, your student will participate in worship, pool, zip line, nightly games and recreation time. They will be staying in dorm-style cabins and will have their meals provided at Camp Timberline.**

By signing below, the participant (or parent/guardian if participant is a minor) acknowledges and accepts the risks of physical injury associated with participation in the activity described above. Except for gross negligence on the part of the sponsor, the participant (or parent/guardian) accepts personal financial responsibility for any bodily personal injury sustained during the activity. Further, the participant (or parent/guardian) promises to hold harmless the sponsoring organization and its representatives for any injury related to the activity.

If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable arbitration process.

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## Multi-Media Permission Release Form

**I give my permission for First Baptist Church of Lewisville** to photograph, or video my child and to use this photograph, voice or video recording in publication, motion pictures, newsletters, and church owned web sites.

**I understand** the resulting photographs, stills, video, motion pictures, and audio tapes **may be published** for the purpose of instruction or information for leaders, students, parents or the general public of church ministries or events.

I give my permission      **Yes**                      **No**

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Parent/Guardian Name (print) \_\_\_\_\_  
(If 18 or over participate name)

Parent/Guardian Signature \_\_\_\_\_  
(If 18 or over participate signature)