

# CAMP CUBBER SUMMER 2024

JUNE 3 - AUGUST 2

Office Use Only	Date: _____ Check/Credit Amount: _____ TS Initials: _____	
	Check# (or last 4 CC): _____ Child Total: _____	EFT PRE
	Reg: _____ Tuition: _____	FA / SD

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Entering Grade for 24/25 School Year:

\_\_\_\_\_ K \_\_\_\_\_ 1st \_\_\_\_\_ 2nd\* \_\_\_\_\_ 3rd \_\_\_\_\_ 4th \_\_\_\_\_ 5th \_\_\_\_\_ 6th \_\_\_\_\_ 7th \_\_\_\_\_ 8th

*\*2nd grade overlaps our K-2nd group and 2nd-4th group. In order to keep group sizes on target, campers born on or after 1/1/17 will be placed with K-2nd (Bear Packs) and campers born on or before 12/31/16 will be placed with 2nd-4th (Expedition). While we are NOT able to move campers born after 12/31/16 up to 2nd-4th (Expedition); if space permits, we will allow rising 2nd grade campers born prior to 1/1/17 to join our Bear Packs. If that pertains to your child please initial here: \_\_\_\_\_ Please place my rising 2nd grader (born prior to 1/1/17) to join Bear Packs.*

Primary E-Mail \*Tax documents will be sent to this address: \_\_\_\_\_

Additional E-Mail(s) \*To be included in mailing list for camp updates: \_\_\_\_\_

Shirt Size (circle one): Youth XS Youth S Youth M Youth L Youth XL Adult S Adult M Adult L Adult XL

Registration fee: \$69 - new campers / \$59 - returning campers / \$49 - current Stars & Comets students.

Payment Methods: Camp EFT (Electronic Funds Transfer) or entire summer prepay. Camp EFT is the preferred method of payment. If not enrolling in the camp EFT program, tuition **must be paid in full at the time of registration.**

Weekly fees: K - 4th Grade: \$169 per week for sessions 1, 2, 3, 4, 6, 7, 8, 9 / \$99 for session 5  
5th - 8th Grade: \$179 per week for sessions 1, 2, 3, 4, 6, 7, 8 / \$109 for session 5 / \$189 for session 9  
Weekly fee includes all field trips, special activities, lunch on Fridays, and a daily PM snack

Enrollment / Days & Weeks Available: Camp 2024 is available Monday - Friday from 7:00 AM - 6:00 PM from June 3 - August 2 (closed Thursday, July 4 and Friday, July 5). Campers must **enroll in at least 3 or more of the 9 total weeks.** In addition there is a minimum number of total weeks required to qualify for Session 9 (see below). There is a 50% cancellation fee (per week, per child) for families canceling prior to May 31. Cancellations that occur after May 31 will still require full payment. Please remember, once enrolled weekly fees will be due WHETHER YOUR CHILD ATTENDS OR NOT.

**REGISTER MY CHILD FOR (PLACE A MARK ONLY BESIDE WEEKS YOU ARE SELECTING):**

_____ Session 1: June 3 - 7	_____ Session 6: July 8 - 12
_____ Session 2: June 10 - 14	_____ Session 7: July 15 - 19
_____ Session 3: June 17 - 21	_____ Session 8: July 22 - 26
_____ Session 4: June 24 - 28	_____ Session 9*: July 29 - August 2
_____ Session 5: July 1 - 3 (closed 7/4 & 7/5)	<i>*Campers must be enrolled in 7 or more total weeks (including Session 9) to be eligible to register for Session 9.</i>

**CAMPER SAFETY / MEDICAL INFORMATION:**

Does your child have any FOOD allergies: \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list: \_\_\_\_\_

Does your child have any other allergies: \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list: \_\_\_\_\_

Does your child have any illnesses, disabilities, medical conditions, diagnoses, etc.\*: \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list: \_\_\_\_\_

\*As a camp, we do our best to accommodate and provide a positive experience for a variety of campers; however, we are a private church camp and as such we do have limitations on the care we can provide. Most of our staff are not specifically trained to work with special needs campers and we cannot provide one-on-one care (or even one-on-a-few care). Prospective campers will need to be able to handle a large group class format (approx. 18) throughout the day. Also, please be aware that camp, by its nature (read below), is less suitable for some prospective campers.

Does your child currently take any medications: \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list: \_\_\_\_\_

Will any of the above medications need to be administered while at camp\*: \_\_\_\_\_ Yes \_\_\_\_\_ No

\*Medications to be administered at camp will require a separate release form (obtained through the camp office) prior to child starting camp. Camp CUBBER does not have the resources / staff to administer all medications. Parent may be required to administer certain types / styles / forms of medication in order for child to attend camp.

If yes, please list medication name, frequency to be given (once daily, twice daily, emergency only, etc.), and style or type of medication (i.e. - oral medication, cream, spray, injection, etc.): \_\_\_\_\_

Are there any other areas of concern that would help your child's group leaders better understand your child and provide a positive camp experience (i.e. - separation anxiety, recent family changes, etc.): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Friend Placement - If Possible Please Place My Child With This Child\*:**

First Choice: \_\_\_\_\_ Second Choice: \_\_\_\_\_

\*Placement in same group is not guaranteed. Requested camper(s) should be in the same grade level as your child. For rising 2nd graders requested campers should have the same birthday designation (both before 12/31/16 or both after 1/1/17) unless older child selected above to be placed with the younger group. Please limit request to one child per line. Second choice will only be considered if first choice does not register for camp. Putting more than one camper per line could negate ALL requests.

Office Use Only: _____ TA _____ BKK _____ CC _____ AL _____ FT _____ PU _____	
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Child Name: \_\_\_\_\_

Parent  
Initials

**Camper Health:** Campers who are ill, whether the illness is communicable or not, should not attend camp. Campers who exhibit any signs of illness (including, but not limited to a fever) will not be admitted to camp. Campers who develop a fever, or exhibit any other signs of illness during the camp day, will need to be picked up from camp immediately. As a parent I understand that I must pick up (or make arrangements to have my child picked up) **within 1 hour of being notified** of my child becoming ill. Campers who inform camp staff of any illnesses or symptoms (whether verifiable or not) will also fall under this category and will need to be picked up.

Similar to Pinellas County Schools, Camp CUBBER has a "no-nit" policy. Anyone with live lice or nits will be sent home from camp until all nits and lice are removed. Campers will be checked upon returning to camp. Camp CUBBER may also check for suspected cases of lice, check entire groups where suspected or actual cases have been reported, and / or do random lice checks as deemed necessary or appropriate by camp administration. If you discover your child has lice, please inform the camp office right away.

In addition, please note that campers who test positive for COVID-19, or any communicable disease, will need to remain out of camp for the time period recommended by the CDC and / or Florida Dept. of Health. Campers who have been exposed to COVID-19 will not be required to isolate, as long as that exposure is not ongoing. If exposure occurs inside the home and the camper is not able to isolate from the person(s) with COVID-19, camper will need to remain out of camp until exposure has ended (everyone is healthy again). The decision to wear a face mask for staff, campers, and parents / guardians will again be optional. That said, while it currently seems unlikely, as this situation is still "fluid", the face mask expectations could change throughout the course of the summer. I agree to comply (and have my child comply) with all current camper health expectations.

Parent  
Initials

**COVID-19 Precautions / Potential for Exposure:** In light of the ongoing COVID-19 situation, we have designed our campus to be as safe as possible and taken into account current guidelines and regulations. As a church, we have taken additional steps in the planning and implementing of all of our ministries that we hope will keep all children, families, and staff safe and protected from potential exposure to this or any other illness. With that said, there is no guarantee that illness will not occur when deciding to enroll your child in a program like ours where he / she will be around other children and staff members and where parents / guardians will be around others while picking up. Please be advised that there is a certain amount of calculated risk you are assuming by enrolling your child in camp 2024. You should evaluate your own risk as you determine whether or not to enroll your child. In line with CDC guidelines, we specifically do not recommend individuals at high risk with severe underlying medical conditions enroll (or be utilized as pickup persons). If there is a case or cases of COVID-19, Camp CUBBER will follow the recommendations of the Florida Department of Health. PHUMC, including Camp CUBBER, disclaims all liability for COVID-19 on our property.

Parent  
Initials

**Field Trips:** We are excited to have some amazing field trips planned for this summer. Please remember that Camp CUBBER does not have control of the weather and there is always a possibility that an outdoor field trip could be rained out, especially during the summer. There are also other circumstances that may occur that are outside of our control (field trip location issue, transportation issue, etc.). Camp DOES NOT have the ability to move or reschedule trips. If possible, the cancelled trip will be replaced with a special onsite event. NO REFUND WILL BE GIVEN DUE TO FIELD TRIP CANCELLATIONS OR CHANGES.

Parent  
Initials

**Drop-Off:** We will offer **car circle from 7:00 AM - 9:15 AM**. This is the preferred way to drop off campers in the morning. **Campers will be assigned one of three drop-off locations** (based on grade of the child). If there is a line, camper must remain in their vehicle until driver is able to pull up to the check in staff. Families with campers in multiple age groups may have to visit multiple check-in locations. If your child is not present by 9:15 AM when car circle closes, he / she will be considered absent for the day. If your child has an earlier departure than 9:15 AM for a field trip he / she will need to arrive at the earlier field trip departure time, which will be listed on the Week @ a Glance Calendars during the summer.

Parent  
Initials

**Pickup:** Campers should be picked up **between 3:45 PM and 6:00 PM** by coming into the building. Parents will need to park and come in using the double doors underneath the large blue overhang. Advance notice will be needed if pickup must occur before 3:45 PM. Camp ends promptly at 6:00 PM. Because the pickup process will take longer than in prior years, please be sure to plan accordingly and allow yourself additional time to come into the facility, sign out, and proceed to your child's room by arriving prior to 5:55 PM. Late fees will be strictly enforced this summer.

Parent  
Initials

**Camper Behavior:** Campers are expected to abide by the camp code of conduct (included in this packet). Campers who behave out of the bounds of those expectations will face disciplinary action (also included in this packet). Depending on the severity of the behavior, disciplinary action could include requiring an early pickup from camp, suspension, or even expulsion. As a parent I understand that I must pick up (or make arrangements to have my child picked up) **within 1 hour of being notified** of my child requiring early pickup due to behavior reasons. Please note that campers who reach advanced stages of disciplinary action or display repeated inappropriate behavior (receiving multiple written behavior notices) may not be eligible for enrollment in future summers.

## **THE NATURE OF CAMP CUBBER:**

While we believe Camp CUBBER will be a positive experience for most children, there are some parts of Camp CUBBER that can be difficult for certain potential campers or their families and should be considered **before registering**:

- Camp CUBBER is a fast-paced summer camp with lots of transitions. Campers change rooms / activities often. Regular routines are also often broken up by special activities or field trips. Campers must be willing and able to make all transitions with their class. Campers that struggle with transitions or having their regular routines shifted may not find Camp CUBBER to be a good fit.
- Camp also begins many mornings with an opening session time that features moving / changing / strobing theatrical lighting, live music, and a large audience (can be as many as 400 - 500 people in attendance). Campers that are easily over stimulated, are averse to large crowds, or who are prone to seizures or other conditions that may be impacted by the lighting, sound, etc. may not find Camp CUBBER to be a good fit.

- Campers will have use of screens and electronic devices (video game systems, iPads, computers, etc.) in some rooms as part of the camp day. Camp activities could also include a movie experience (on or off site) as well as videos that are part of the learning experience. We know screens and device use can be difficult for some campers (over stimulation or hard to stop once begun). Campers will need to be able to use those appropriately, transition appropriately after use, and understand that screens / devices are not a part of many other parts of the camp day and will only be used at appropriate times.
- We are targeting approximately 18 campers in each group again this summer, typically with one group leader (when on campus), so prospective campers should be prepared for a large group class format. Also, most of our staff are not specifically trained to work with students with special needs. Prospective campers who need one-on-one care (or one-on-a-few care) will not find Camp CUBBER to be a good fit.
- As part of the group nature and atmosphere of camp, campers will need to be able to interact well with other campers in their group, especially without being overly aggressive, even in trying or frustrating circumstances. Campers will need to stay with their group at all times. At no time may a camper leave the room or area without permission from a group leader, this applies even in trying or frustrating circumstances as well.
- Campers will go on a field trip each week. Those trips are a part of the camp experience and we do not have the staff or ability to offer alternate accommodations if campers do not want to go (or if families do not want their child to go). Families may, of course, choose to keep their child home on a field trip day if desired. While it does not occur often, please be aware that some field trips may leave rather early or return after the close of the camp day. Even when not specifically leaving early, field trip days can be tiring and make for long days for campers. Campers will need to be able to balance both the excitement and exhaustion of going on a field trip with their group. In addition, transportation is typically provided on church shuttle buses or school buses, and on occasion on passenger vans or charter buses. These forms of transportation can sometimes be difficult on campers that struggle with motion sickness.
- Camp CUBBER is a large summer camp with a huge campus that can be a bit overwhelming at times for new families and pickup persons coming for the first few times. Also, because of the size of the campus and number of campers, drop-off / pickup can take longer than other summer camps at times and parents should plan accordingly.
- Camp CUBBER provides a schedule that shows where campers are throughout the day. We do our best to stick to that schedule, but there are occasions it must be altered due to staffing, attendance, or building maintenance and the person picking up may be redirected to an alternate room (upon arriving to the room your child should be in) requiring additional time and walking to another room. We ask for additional patience during these times. And as always, if you need help locating your child, please feel free to see an office staff.
- Camp CUBBER is a church summer camp. Campers will encounter Christian music and elements of the Christian faith while at camp (see #13 of our fees, policies, and conduct page). Please note that we DO NOT provide alternate accommodations to remove campers of varying faiths during those times.

*I understand the nature of Camp CUBBER as stated in this packet. In addition, I affirm that all information that I have provided in this packet (including known allergies, current medications, medical conditions, special needs / areas of concern) is complete and accurate to the best of my knowledge.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FIELD TRIP PERMISSION:**

I give my consent for my child, \_\_\_\_\_, to go on any field trip with Camp CUBBER @ PHUMC and to make incidental stops en route and return as may be desirable or necessary. I will be notified in advance via weekly camp calendar and / or email of the designated site of the field trip including necessary details. I understand that I hold Palm Harbor United Methodist Church, Stars & Comets, Camp CUBBER, its officers, agents, and employees harmless from any and all liability claims, which may arise out of or in connection with my child's participation in this activity. I authorize camp representatives to obtain medical treatment for my child in case of illness or injury and agree to pay for any expense incurred for this treatment. I fully understand that campers are to abide by all rules and regulations governing conduct during the trip. Any violation of these rules may result in a child's removal from part or all of the field trip and the parent / guardian may be notified to pick their child up from the field trip location.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Sign in the presence of a Notary*

**STATE OF FLORIDA: COUNTY OF PINELLAS**

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 2024 by \_\_\_\_\_, who is \_\_\_ personally known to me or \_\_\_ has produced the following identification - State Issued ID #: \_\_\_\_\_ Other ID #: \_\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

**LIABILITY RELEASE:**

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above-named minor (“camper”). I, on my own behalf, and on behalf of the minor, agree to release, indemnify, and to hold harmless Palm Harbor United Methodist Church, and all of its Ministries; Westlake Christian School, The Robin’s Nest, Stars & Comets, and Camp CUBBER, and their respective directors, officers, representatives, ministers, members, agents, guests, invitees, students, employees, and volunteers from any and all claims, including but not limited to bodily injury or property damage claims, judgments, loss, costs, and expenses arising out of or connected with attendance at all of the above Ministries, and any claim arising out of or connected with any illness or injury that Minor may incur or sustain during camp, all activities associated with camp, and while traveling to and from the site for camp.

I have read and agree.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FEES, POLICIES, AND CODE OF CONDUCT:**

I have read and agree to the fees, policies, and conduct described in this 2024 registration packet (detailed on the last 4 pages of this packet). I have also reviewed, fully understand, and have explained to my child the Code of Conduct including the behavior that is expected and the consequences if not upheld.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PHOTO RELEASE:**

As parent and / or legal guardian, I give permission to Palm Harbor United Methodist Church and any of it’s ministries or aliases (Camp CUBBER, Stars & Comets, etc.) to reproduce and publish photographs taken of my child for any necessary or appropriate camp or church related publicity purposes which may include, but are not limited to printed publications such as brochures and newsletters, digital images, website, videos and social media. I acknowledge that neither the minor children nor I will receive financial compensation for any such publications.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SOCIAL MEDIA EXCLUSION PREFERENCE:**

*Would you prefer that your child’s photograph **NOT** be posted on social media **IF / WHEN** possible (please note this means your child may be **EXCLUDED** from photos being taken **AND / OR** activities that are being photographed).*

**CIRCLE ONE**

**YES      NO**

**PLEASE NOTE:** We know that you have many summer camp options for your child and we thank you for selecting Camp CUBBER at Palm Harbor United Methodist Church. While we believe that our camp is one of the best summer camp options in the Tampa Bay area, we know it is not for everyone. We do expect families that register for Camp CUBBER 2024 to understand, agree with, and abide by our fees, policies, conduct / discipline, and releases including our payment options and the photo release. If you find that these policies are not for you, we encourage you to find a camp that better suits the needs of your family. Thank you!

# CHILD INFORMATION AND RELEASE FOR EMERGENCY CARE

Child's Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Entering Grade for **2024-2025**: \_\_\_\_\_ School Attending for **2024-2025**: \_\_\_\_\_

School Attended for **2023-2024 (If Different)**: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Who Has Legal Custody: \_\_\_\_\_ Relationship: \_\_\_\_\_

Mom's Name (First and Last): \_\_\_\_\_

Home Telephone: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Dad's Name (First and Last): \_\_\_\_\_

Home Telephone: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

Street Address (number, apt., street) City State Zip Code

Medical Insurance Co: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Allergies or Medical Conditions: \_\_\_\_\_

Medications Routinely Taken: \_\_\_\_\_

## **Additional Eligible Pickup Persons - Minimum of 2 is Required (If completing by hand please print legibly):**

Name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ *Circle One:* Work or Cell: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ *Circle One:* Work or Cell: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ *Circle One:* Work or Cell: (\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ *Circle One:* Work or Cell: (\_\_\_\_) \_\_\_\_\_

## **Emergency Contact - Only used if the custodial parent(s) / guardian(s) cannot be reached:**

Name \_\_\_\_\_ Address \_\_\_\_\_  
Street Address City State Zip

Home Phone: \_\_\_\_\_ *Circle One:* Work or Cell: \_\_\_\_\_

## **PLEASE SIGN IN THE PRESENCE OF A NOTARY:**

I hereby give my consent to consult the child's physician / health resource listed above in case of emergency if parent / guardian cannot be reached. I also hereby give my consent to any emergency facility and physician to administer necessary treatment to my child, \_\_\_\_\_, in the event of an emergency at which time I cannot be reached. I also give consent to transport by ambulance if the situation warrants it.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Custodial Parent / Legal Guardian (Affiant)

## **STATE OF FLORIDA: COUNTY OF PINELLAS**

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 2024 by \_\_\_\_\_, who is \_\_\_ personally known to me or \_\_\_ has produced the following identification - State Issued ID #: \_\_\_\_\_ Other ID #: \_\_\_\_\_.

Notary  
Stamp  
or Seal:

\_\_\_\_\_  
Signature of Notary Public



## CAMP CUBBER 2024 - PAYMENT AUTHORIZATION FORM

Select One:

Weekly EFT payment (camp's preferred method of payment). Complete info below.

Summer Prepay\*

*\*If selecting summer prepay, please note that credit card information must be completed and will be kept on file to cover all incidentals.*

*(Prepay Only) - Name on Card: \_\_\_\_\_ Exp. Date: \_\_\_\_\_*

*Credit Card # \_\_\_\_\_ CVV: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_*

*Signature: \_\_\_\_\_ Date: \_\_\_\_\_*

*I (we) authorize Palm Harbor United Methodist Church to initiate charges and if necessary, adjustments on provided card.*

Please **ATTACH VOIDED CHECK HERE**  
to verify correct bank routing and account numbers with your Financial Institution.  
*If your account does not have checks, you may obtain a letter from your financial institution instead.*

COMPANY NAME: Palm Harbor United Methodist Church

COMPANY NUMBER: 59 - 1689278 (Tax. ID)

I (we) authorize Palm Harbor United Methodist Church to initiate debit entries and if necessary, credit entries for adjustments to any debit entries made in error to the account at the Financial Institution listed below:

Bank Name	Print Name
Routing / Transit Number (9 positions)	Authorized Signature
Checking Account Number	Date

**Campers Attending:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Grade: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Grade: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Office  
Use Only:

***EFT will be processed through your bank using the name "School/Tuition".  
To avoid a \$25 NSF fee, please do not cancel the charges through your bank.***

*Authorized debit entries include weekly tuition, cancelation fees, t-shirt fees, lunch fees, late pickup fees, replacement clothes fees, add-on programming fees (CUBBER+, CUBBER Nights, etc.), or other additional charges that may arise including any outstanding balances. The authority is to remain in full force and effect until the Company has received written notification of its termination in such time and in such manner as to afford Company and Depository Institution a reasonable opportunity to act upon it.*







# Only for Campers in Expedition Attending Session 3

## Participant Agreement, Release and Assumption of Risk (The Agreement) – Sky Zone Clearwater

Please print and fill out highlighted areas completely or complete electronically at [www.skyzone.com/Clearwater](http://www.skyzone.com/Clearwater)

Must be completed for participants under the age of 18 (Print up to four names/birth dates below of children of the SAME parent, legal guardian, or power of attorney):		
<b>Minor Participant 1: First Name</b>	<b>Last Name</b>	<b>Birth Date</b>
<b>Minor Participant 2: First Name</b>	<b>Last Name</b>	<b>Birth Date</b>
<b>Minor Participant 3: First Name</b>	<b>Last Name</b>	<b>Birth Date</b>
<b>Minor Participant 4: First Name</b>	<b>Last Name</b>	<b>Birth Date</b>

**PLEASE ONLY VISIT THE PARK IF THE FOLLOWING APPLY:**

**\_\_\_\_\_ (Initial Here)** (1) You are willing to practice social distancing and maintaining at least six feet between individuals in all areas of the park; (2) You are healthy enough to participate, and do not have symptoms of COVID 19 such as feeling sick, coughing, sneezing, shortness of breath, fever or are not feeling well; (3) You do not live with or visited a person or family member that has been diagnosed with or suspected of having COVID-19; (4) you consent to having you (or your minor child's) temperature checked upon entering the park.

I have voluntarily elected to use and, if applicable, to allow the minor child(ren) identified above and all minor children under my supervision and referred to individually and collectively herein as "Child", to use the Sky Zone facilities and equipment located at 13000 66<sup>th</sup> St N Largo, FL 33773 (the "Sky Zone Facility"). In consideration for being allowed to use said facilities and equipment, and any other services provided by Fly High Parks LLC or its employees or agents at said location, or any other location within the State of Florida, I represent, acknowledge and agree as follows:

I acknowledge and agree that this Agreement covers and is intended to release and provide other benefits, legal protections, and consideration to Fly High Parks LLC, RPSZ Construction LLC, Sky Zone Franchise Group LLC, Sky Zone LLC, and their respective and collective agents, owners, officers, managers, shareholders, affiliates, volunteers, participants, employees, and all other persons or entities acting in any capacity on their respective or collective behalf (collectively, "SZ")

**RELEASE OF POTENTIAL INJURIES**

I acknowledge and agree that the use of trampolines and the other equipment at the Sky Zone Facility and that participating in trampoline and other activities is inherently and obviously dangerous. These risks include serious physical or emotional injury, paralysis, death, damage to myself, the Child, and/or third parties, and damage to personal property of any or all such persons. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity, which I further agree is for recreational purposes and completely voluntary. I acknowledge and agree that, while the trampoline and other activities that take place at the Sky Zone Facility are monitored generally by Sky Zone Facility employees, it is not feasible for such employees to monitor the activities and actions of all customers at all times or all customers simultaneously. Furthermore, Sky Zone Facility employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's health or abilities. They may give incomplete warnings or instructions, and the equipment being used might malfunction.

**SPECIFIC RELEASE FOR "GLOW" ACTIVITIES**

**\_\_\_\_\_ (Initial Here)** I acknowledge that the Sky Zone Facility may at any time engage in a promotion referred to as "Glow", and other similar programs and activities, that involve the use of reduced and altered or theatrical lighting and special effects, which can increase the inherent and obvious dangers of the activity and can lead to physical or emotional injury, paralysis, death, or damage to myself, the Child, and/or third parties, and damage to personal property of any or all such persons. I understand that special rules apply to "Glow" activities, and the other programs and activities that involve the use of reduced and altered or theatrical lighting and special effects, and that I and the Child may choose not to participate in such activities. I acknowledge and agree that I and the Child may participate voluntarily in the "Glow" and other similar programs and activities solely and exclusively at our own risk, and that by participating, we waive the right to seek damages for any injuries that occur.

**VOLUNTARY ASSUMPTION OF RISK**

I acknowledge and agree that I and the Child are participating voluntarily at our own risk. I acknowledge and agree that the actions or activities of other customers or the actions or inactions of Sky Zone Facility employees could cause me or the Child significant bodily injury (as described in this Agreement), and that SZ is not responsible for the actions or activities of customers using the Sky Zone Facility or the negligence of its employees in supervising the Sky Zone Facility or its usage, including actions, activities, or omissions that result in such harm. Some of the risks include, but are not limited to, the following:

- a) Participants may die or become paralyzed, partially or fully, through their use of the Sky Zone facility and participation in Sky Zone activities.
- b) Participants may suffer cuts, scrapes, bumps, bruises, concussions, the transmission of disease strains and allergic reactions through use of the Sky Zone Facility equipment or contact with other participants or surfaces they have contacted. Participants may sprain, pull, break or otherwise seriously externally or internally injure their head, face (including nose and teeth/jaw), neck, torso, spine, arms, wrists, hands, legs, ankles, feet or other body parts as a result of falling off the trampoline(s) or other equipment, landing improperly on the trampolines or other equipment, or making contact with other participants. As noted in paragraph a) above, such injuries can lead to paralysis, disfigurement or death. Participation may result in heat stroke, heart attacks, dehydration and other exertion-related medical events.
- c) Participants may fall on each other, resulting in broken bones and other serious injuries. Double bouncing, more than one person per trampoline, flipping, running and bouncing off of the walls and wall-mounted trampolines, and other participant body movements (whether planned or unplanned) can create a rebound effect and lead to unpredictable body movements and anticipated or unanticipated bodily contact, any or all of which can lead to serious injury.
- d) Traveling to and from trampolines can result in similar physical injury (even if the participant is not himself or herself bouncing at the time).
- e) Observing, standing, sitting or taking photographs at or near any trampoline or activity can result in similar physical injury (even if the observer is not himself or herself participating at the time).
- f) Participation during reduced or altered lighting "Glow" events can affect depth perception and visibility and may cause me and/or my Child to fall, slip, misstep, collide with other jumpers, or collide with equipment which can result in a greater risk of serious physical or emotional injury, paralysis, or death.

**AGREEMENT TO PAY MY OWN MEDICAL EXPENSES**

I acknowledge, accept, and assume the risk of any and all medical conditions, limitations, or disabilities (whether temporary or permanent) that I or the Child possess, whether known or unknown, which might contribute to or exacerbate any injury I or the Child might sustain as a result of using the Sky Zone Facility or any of its equipment. I acknowledge and agree that if medical assistance (of any form, including emergency care, hospitalization, out-patient care, and/or physical therapy) is required or performed as a result of any injury I or the Child sustains while using the Sky Zone Facility, such assistance shall be at my own expense.

**RELEASE OF LIABILITY**

The Releasing Parties hereby forever, irrevocably and unconditionally release, waive, relinquish, discharge from liability and covenant not to sue SZ, and their successors, predecessors-in-interest, and insurers (collectively, the "Releasees") from any and all claims, demands, rights, actions, suits, causes of action, obligations, debts, costs, losses, charges, expenses, attorneys' fees, damages, judgments and liabilities, of whatever kind or nature, in law, equity or otherwise, whether now known or unknown, suspected or unsuspected, and whether or not concealed or hidden, related to or arising, directly or indirectly, from my or the Child's access to and/or use of the Sky Zone Facility, premises and/or its equipment (whether trampolines or otherwise), the Child's and/or my entry into the Sky Zone Facility, the condition, maintenance, inspection, supervision, control or security of the Sky Zone Facility, the failure to warn of dangerous conditions in connection with the Sky Zone Facility, and/or the acts or omissions of SZ or any of the Releasees, including, without limitation, any claim for negligence, failure to warn or other omission, property damage, personal injury, emotional injury, illness, bodily harm, paralysis or death. I understand that this release and waiver applies not only to use of the trampolines, but also all other equipment, and all activities and games at the Sky Zone Facility. I understand that this release and waiver applies to and includes all activities that I or my Child engage in at the premises, whether inside or outside the Sky Zone Facility. In the event that any claim released herein is brought by, or asserted on behalf of, the Releasing Parties, I shall immediately defend, indemnify and hold harmless the Releasees, and any of them, from any loss or liability, including reasonable attorneys' fees, associated therewith or arising therefrom.

**ARBITRATION OF DISPUTES; TIME LIMIT TO BRING CLAIM**

**\_\_\_\_\_ (Initial Here)** I understand that by agreeing to arbitrate any dispute as set forth in this section, I am waiving my right, and the right(s) of the minor child(ren) above, to maintain a lawsuit against SZ and the other Releasees for any and all claims covered by this Agreement. By agreeing to arbitrate, I understand that I will **NOT** have the right to have my claim determined by a jury, and the minor child(ren) above will **NOT** have the right to have claim(s) determined by a jury. Reciprocally, SZ and the other Releasees waive their right to maintain a lawsuit against me and the minor child(ren) above for any and all claims covered by this Agreement, and they will not have the right to have their claim(s) determined by a jury. **ANY DISPUTE, CLAIM OR CONTROVERSY ARISING OUT OF OR RELATING TO MY OR THE**

## Only for Campers in Expedition Groups Attending Session 3

**CHILD'S ACCESS TO AND/OR USE OF THE SKY ZONE PREMISES AND/OR ITS EQUIPMENT, INCLUDING THE DETERMINATION OF THE SCOPE OR APPLICABILITY OF THIS AGREEMENT TO ARBITRATE, SHALL BE BROUGHT WITHIN ONE YEAR OF ITS ACCRUAL (i.e., the date of the alleged injury) AND BE DETERMINED BY ARBITRATION IN THE COUNTY OF THE SKY ZONE FACILITY, FLORIDA, BEFORE ONE ARBITRATOR. THE ARBITRATION SHALL BE ADMINISTERED BY JAMS PURSUANT TO ITS RULE 16.1 EXPEDITED ARBITRATION RULES AND PROCEDURES. JUDGMENT ON THE AWARD MAY BE ENTERED IN ANY COURT HAVING JURISDICTION. THIS CLAUSE SHALL NOT PRECLUDE PARTIES FROM SEEKING PROVISIONAL REMEDIES IN AID OF ARBITRATION FROM A COURT OF APPROPRIATE JURISDICTION.** This Agreement shall be governed by, construed and interpreted in accordance with the laws of the State of Florida, without regard to choice of law principles. Notwithstanding the provision with respect to the applicable substantive law, any arbitration conducted pursuant to the terms of this Agreement shall be governed by the Federal Arbitration Act (9 U.S.C., Sec. 1-16). I understand and acknowledge that the JAMS Arbitration Rules to which I agree are available online for my review at jamsadr.com, and include JAMS Comprehensive Arbitration Rules & Procedures; Rule 16.1 Expedited Procedures; and, Policy On Consumer Minimum Standards Of Procedural Fairness.

### PHOTO/VIDEO/SOCIAL MEDIA WAIVER

In connection with my and the Child's use of the Sky Zone Facility, I consent to the recording of the Child's and my physical likeness and/or voice through mechanical, photographic, technical, digital, electronic or other means ("Recordings"). I hereby consent to and authorize SZ and its agents, representatives, employees, successors and assigns to use, in perpetuity, such Recordings, as well as the Child's name and my name, for any purpose, including advertising, promoting, exploiting and/or publicizing any Sky Zone Facility. I further agree that the foregoing includes the consent to use the Child's and/or my physical likeness in any form. In addition, I waive any and all claims I may have in connection with the Recordings.

### TERM OF AGREEMENT

I understand that this agreement extends forever into the future and will have full force and legal effect each and every time I or my child(ren)/ward(s) visit Sky Zone, whether at the current location or any other location or facility.

### SAFETY IS YOUR RESPONSIBILITY: I AND EACH CHILD AGREE TO FOLLOW THE CODE OF PATRON RESPONSIBILITY:

- a) You acknowledge that there are inherent risks in the participation in or on any trampoline court, and that such risks include not only the use of trampolines, but other activities and equipment. Patrons of a trampoline court who use trampolines, and those who engage in any other activities or use any other equipment, by participation, accept the risks inherent in such participation of which the ordinary prudent person is or should be aware. Patrons have a duty to exercise good judgment and act in a responsible manner while using the trampoline court and other equipment, and while engaging in such activities. Patrons have a duty to obey all oral or written warnings, or both, prior to or during participation, or both.
- b) You have a duty to not participate in any activity on any trampoline court, or engage in any other activity or use any other equipment, when under the influence of drugs or alcohol.
- c) You have a duty to properly use all safety equipment provided, whether for the trampolines at the trampoline court, or otherwise.
- d) You have a duty to not participate in any activity on any trampoline court, or engage in other activities or use other equipment, if you have pre-existing medical conditions, circulatory conditions, heart or lung conditions, recent surgeries, back or neck conditions, knee or ankle conditions, high blood pressure, known pregnancy, any history of spine, musculoskeletal or head injuries, or if you may be pregnant.
- e) You have a duty to remove inappropriate attire including hard, sharp or dangerous objects such as buckles, pens, purses, badges and so forth.
- f) You have a duty to avoid bodily contact with other patrons.
- g) You have a duty to conform with or meet height, weight or age restrictions imposed by the manufacturer or owner to use or participate in any trampoline park activity, whether involving the use of trampolines, or otherwise.
- h) You have a duty to avoid crowding or overloading individual sections of the trampoline court, or other equipment.
- i) You have a duty to use the trampoline court, and other equipment, within your own limitations, training and acquired skills.
- j) You have a duty to avoid landing on the head or neck. Serious injuries, paralysis or death can occur when landing on the trampoline court bed, or elsewhere, whether involving the trampoline, other equipment, or otherwise.
- k) You also agree to follow and obey all posted and stated warnings and patron education signs.
- l) You agree to explain all safety rules to each Child you accompany, and to ensure that each Child obeys the safety rules.

### NOTICE TO THE MINOR CHILD'S PARENT OR NATURAL GUARDIAN:

**READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF SZ AND ALL OTHER RELEASEES USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM SZ AND ALL OTHER RELEASEES IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND SZ AND ALL OTHER RELEASEES HAVE THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.**

**(Initial Here)** I have read and understood the preceding paragraph. I have had sufficient opportunity to read this document. I have read and understood and agree to be bound by its terms. I understand that employees working at the Sky Zone Facility, including the manager, do not have the authority to waive any provision of this Agreement. This Agreement constitutes and contains the entire agreement between SZ and me relating to the Child's and my use of the Sky Zone Facility. There are no other agreements, oral, written, or implied, with respect to such matters. I further agree that this Release shall be construed in accordance with the laws of the State of Florida. If any term or provision of this Release shall be held illegal, unenforceable, or in conflict with any law governing this Release the validity of the remaining portions shall not be affected thereby. By signing below, I represent and warrant that I am the parent, legal guardian, natural guardian or power-of-attorney of the above listed Child(ren) and have the authority to execute this Agreement on his/her or their behalf and to act on his/her or their behalf. I have read each and every paragraph in this document and I and they agree to be bound by the terms stated therein, including the release of liability contained therein. I further agree to indemnify and hold harmless the Releasees from any and all claims which are brought by or on behalf of this or these minor Child or Children, or any of them, which are in any way connected with, arise out of, or result from their use of the Sky Zone Facility. I am 18 years of age or older. I am entering this agreement on behalf of myself, my spouse or domestic partner, the Child, and our respective and/or collective issue, parents, siblings, heirs, assigns, personal representatives, estate(s), and anyone else who can claim by or through such person or persons (collectively, the "Releasing Parties").

### Only for Campers in Expedition Attending Session 3

IN SUMMARY, BY MY SIGNATURE BELOW, I ACKNOWLEDGE THAT IF I OR ANY OF MY CHILDREN ARE INJURED IN ANY WAY, THIS WAIVER PREVENTS AND PROHIBITS ANY RECOVERY OF MONEY FROM ANY SKY ZONE RELATED ENTITY.

Parent/Legal Guardian/Natural Guardian/Power of Attorney/Participant Signature (if 18 or older) \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Legal Guardian/Natural Guardian/Power of Attorney/Participant' Information (if 18 or older)  
Please Print Clearly Using Blue or Black Ink.

Signer First Name	Signer Last Name	Signer Birth Date	
Street Address	City	State/Province	Zip/Postal Code
Phone Number	Email Address		

Check box if you would not like to receive free email promotions and discounts to the email address provided above, I may unsubscribe from emails at any time.



## ONLY FOR CAMPERS IN SPACE TEAMS ATTENDING SESSION 6

### EPPERSON LAGOON

#### ASSUMPTION OF RISK, INDEMNIFICATION AND WAIVER OF LIABILITY

In consideration of the permission granted to me to access and use those certain facilities available to me as a user or guest at Epperson Club (the "**Club**"), I, the undersigned participant (the "**Participant**"), on behalf of myself and my minor children, including, but not limited to, those listed below (the "**Minors**"), and subject to *Florida Statutes* § 744.301, hereby acknowledge and agree as follows:

- **ASSUMPTION OF RISK.** The Participant understands that his/her access to, or use of, (a) the Club; (b) the services, amenities, facilities, equipment, improvements, and property of, or at, the Club (the "**Club Facilities**"); and (c) the real property upon which the Club and Club Facilities are located (the "**Club Property**") carry certain inherent risks and hazards that cannot be eliminated regardless of the care taken to avoid injuries. The Participant also understands that there are inherent risks and hazards associated with swimming and participation in water-related and recreational activities, including, without limitation, those associated with the use of the Crystal Lagoon®, recreational "Wibit" obstacle course, rock-wall, inflatable water slide, stand up paddleboards ("**SUPs**"), kayaks, and other equipment at the Club, Club Facilities, and Club Property. Some of these risks and hazards are outlined below, but there may be other unknown risks and hazards that are an inevitable part of using the Club, Club Facilities, or Club Property. Because of these risks and hazards, serious accidents may occur, including, without limitation, accidents associated with falls, physical contact with equipment or other persons, encounters with wildlife, hitting the lagoon bottom, bad weather, sun exposure, and complications of existing or developing medical conditions. All of these risks and hazards, and others not listed here, may result in injuries severe enough to require serious medical care or short or long-term disability, dismemberment, and even death.

By signing this document ("**Agreement**"), the Participant agrees that the Participant and any Minors (a) are aware of the risks related to the Club, Club Facilities, and Club Property; (b) are responsible for his/her/their own wellbeing; and (c) will enter upon and use the Club, Club Facilities, and Club Property at his/her/their own risk. Further, the Participant agrees that the Participant's and any Minors' access to or use of the Club, Club Facilities, or Club Property is completely voluntary, and that he/she/they expressly assume all risks associated therewith, including, but not limited to, scrapes, lacerations, impact injuries, burns, illnesses, infections, mental stresses and anxieties, weather conditions, slips and falls, equipment failures, damages to property, drownings, disfigurements, and deaths. In other words, the Participant assumes all the risks and responsibility for his/her own wellbeing and the wellbeing of his/her Minors and guests. The Participant also (x) authorizes the Releasees (as defined below) to call for medical care for the Participant and any Minors or guests if, in the Releasees' sole opinion, medical attention is prudent or necessary; and (y) agrees to pay all costs associated with such care.

The Participant and Minors will abide by all rules and instructions of the Club, Club Owner, Club Manager, or Equipment Lessor, and their respective personnel or contractors. Also, because non-swimmers should not participate in water-related activities, by signing this Agreement, the Participant represents and agrees that the Participant and Minors are in good health, know how to swim, and can swim safely.

- **WAIVER AND RELEASE OF CLAIMS; DEFENSE AND INDEMNITY.** The Participant (for himself/herself and his/her family members, Minors, guests, personal representatives, heirs, trustees, trusts, beneficiaries, insurers, successors, assigns, and all others claiming by or through him/her (collectively, the "**Releasors**")) hereby unconditionally and irrevocably covenants not to sue, releases, acquits, forever discharges, and agrees to defend, indemnify, and hold harmless the Club, all Club owners (currently, Epperson Club, LLC, a Florida limited liability company (the "**Club Owner**")), all Club managers (currently, WTS International, Inc., a District of Columbia corporation (the "**Club Manager**")), and all providers of rental equipment (the "**Equipment Lessor**") (and their respective past, present, and future employees, officers, directors, representatives, agents, principals, consultants, contractors, owners, shareholders, members, managers, partners, subsidiaries, parents, affiliates, insurers, successors, assigns, and any others claiming by or through them (collectively, the "**Releasees**")) for or from – and also knowingly and intentionally waives – any and all claims, rights, remedies, damages, liabilities, guaranties or warranties (express, implied, or statutory), representations, omissions, and any other claims or losses of any type whatsoever (whether common law, statutory, or equitable; whether known, unknown, anticipated, unanticipated, foreseen, unforeseen, accrued or not accrued; and whether caused, in whole or in part, by the negligence, acts, omissions, carelessness, or other conduct of the Releasees) arising from, or relating to, (a) the Participant's or any Minors' presence at, or use of,

## ONLY FOR CAMPERS IN SPACE TEAMS ATTENDING SESSION 6

the Club, Club Facilities, or Club Property; (b) the Participant's or any Minors' use of any amenities or equipment at the Club, Club Facilities, or Club Property, including, without limitation, the Crystal Lagoon®, recreational obstacle course, water slide, stand up paddleboards, kayaks; (c) the Participant's or any Minors' participation in any contest, game, function, exercise, competition, or other activity (i) at the Club, Club Facilities, or Club Property; or (ii) operated, organized, arranged, or sponsored by the Club, Club Owner, Club Manager, or any other Releasee; (d) any personal injuries or property damage caused by the intentional or negligent acts or omissions of the Participant or any Minors; or (e) any loss, theft of, or damage to any of the Participant's or Minors' personal property (collectively, the "**Released Claims**").

- **RENTAL OR USE OF WATER EQUIPMENT.** The Participant and any Minors hereby make the following representations, and acknowledge and agree that he, she, or they will abide by the following warranties and rules, all of which govern the use of water or rental equipment at the Club, Club Facilities, or Club Property:
  - The Participant and Minors have sufficient physical strength, endurance, and experience to enable him, her, or them to (i) use all equipment at the Club, Club Facilities, or Club Property; or (ii) participate in all classes, lessons, or other programs at the Club, Club Facilities, or Club Property.
  - The Participant and Minors do not have any health problems or medical conditions that could prejudice his, her, or their (i) use of all equipment at the Club, Club Facilities, or Club property; or (ii) participation in classes, lessons, or other programs at the Club, Club Facilities, or Club Property.
  - Standing on kayaks is prohibited, as is standing on SUPs within 8ft. of the dock, swim-up bar, or any other structures in or around the Crystal Lagoon®.
  - The Participant and Minors will follow all instructions given to him, her, or them by any persons conducting the subject activity or activities, including, without limitation, instructions to wear life preservers or similar protective equipment.
  - All individuals who use the inflatable obstacle course must know how to swim and **MUST** wearing a personal flotation device ("**PFD**").
  - All individuals who use kayaks or SUPs **MUST** wear a life jacket or other PFD at all times. All individuals who do not comply will (i) be ordered to return to shore and relinquish their rental equipment without refund; and (ii) in the discretion of the manager on duty, be required to leave the Club.
  - Intentional capsizing or swamping is prohibited. All individuals observed doing so will (i) be ordered to return to shore and relinquish their rental without refund; and (ii) in the discretion of the manager on duty, be required to leave the Club.
  - Equipment will not be removed from the Club.
  - No alcoholic beverages are permitted to be consumed on, or prior to using, any equipment. The determination of fitness to operate equipment shall be made in the sole discretion of the manager on duty and shall be final.
  - All individuals must adhere to Florida Marine laws, as well as all Club rules.
- **DISPUTE RESOLUTION; JURY TRIAL WAIVER.** THE PARTICIPANT WAIVES THE RIGHT TO A JURY TRIAL, and agrees that any dispute arising from, or related to, (a) this Agreement; or (b) the Participant's or the Minors' presence at, or use of, the Club, Club Facilities, or Club Property shall first be submitted to mediation and, if not settled during mediation, shall be submitted to binding arbitration as provided by the Federal Arbitration Act (or, if inapplicable, by similar state statute) and not by a court of law. All decisions respecting the arbitrability of a dispute also shall be decided by the arbitrator. The mediation shall be conducted before the American Arbitration Association (the "**AAA**") in accordance with the AAA's Commercial Mediation Rules. If the dispute is not resolved by mediation, the dispute shall be submitted to binding arbitration before the AAA in accordance with the Commercial Arbitration Rules, and judgment upon the award rendered by the arbitrator may be entered in, and enforced by, any court having jurisdiction over the matter. This Agreement in all respects shall be construed, interpreted, governed, and enforced according to the laws of Florida, without regard to Florida's choice of law rules, and the exclusive venue for any mediation or arbitration shall be in Hillsborough County, Florida.

## ONLY FOR CAMPERS IN SPACE TEAMS ATTENDING SESSION 6

- **FUTURE VISITS.** This Agreement applies to the Participant's or Minors' use of, or presence at, the Club, Club Facilities, or Club Property on the dates specified below and all future dates on which the Participant or Minors use, or are present at, the Club, Club Facilities, or Club Property.
- **INTERPRETATION; SEVERABILITY.** This Agreement is intended to provide the broadest possible protection for the Releasees, subject to *Florida Statutes* § 744.301. Thus, and to be clear, nothing contained in this Agreement should be construed to waive or release more than allowed by § 744.301 or impose a burden on the Minors prohibited by § 744.301. Similarly, if any part of this Agreement, or the application thereof under certain circumstances, is held invalid or unenforceable, the remainder of this Agreement, or the application of such part under other circumstances, shall not be affected thereby.

THE PARTICIPANT ACKNOWLEDGES THAT HE/SHE (A) HAS READ, AND FULLY UNDERSTANDS, ALL OF THE TERMS AND CONDITIONS IN THIS AGREEMENT; (B) UNDERSTANDS THAT HE/SHE IS GIVING UP SUBSTANTIAL RIGHTS, INCLUDING HIS/HER FAMILY'S RIGHT TO SUE; AND (C) IS VOLUNTARILY SIGNING THIS AGREEMENT, PHYSICALLY OR DIGITALLY, ON BEHALF OF HIMSELF/HERSELF AND ANY MINORS.

### AGREEMENT FOR MINOR PARTICIPANT

I, the above-signed adult Participant, hereby agree that, if while participating in any activities within the Club, Club Facilities, or Club Property, I observe any unusual hazard or condition, which I believe jeopardizes my safety or that of the Minors or any other person, I will remove the Minors from participation in the activities and immediately bring said hazard or condition to the Club Owner's, Club Manager's, or Equipment Lessor's attention. Further, and regardless of any such hazards or conditions, I agree that I will explain to the Minors that the risk of injury while participating in the activities and using the Club, Club Facilities, and Club Property can be reduced by following all applicable rules, and through the use of common sense and good judgment. My signature below reflects my (a) assent that the Minors are bound by this Agreement; and (b) representation and agreement that I am the natural guardian of the Minors listed below, and possess the legal authority to sign this Agreement on his, her, or their behalf.

### NOTICE TO MINOR CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF THE RELEASEES USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE RELEASEES IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND RELEASEES HAVE THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

Parent Name: \_\_\_\_\_ Minor Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_





# Only for Campers in Expedition Attending Session 7



Appointment Date and Time: \_\_\_\_\_

Adventure Scenario(s): \_\_\_\_\_

Age (if minor): \_\_\_\_\_

## WAIVER AND RELEASE OF LIABILITY (PERPETUAL UNLESS REVOKED)

### PLEASE READ CAREFULLY BEFORE SIGNING

In exchange for participation in the recreational activities operated by Laser Entertainment Group, Inc. d/b/a Laser Ops Extreme Gaming Arcade™ and/or use of the services, equipment, facilities and property located in Tampa, Florida, or at any other premises leased to or under the control or supervision of Laser Entertainment Group, Inc. d/b/a Laser Ops Extreme Gaming Arcade™ (the “Adventures”), I certify, acknowledge and agree to, on my own behalf and (if applicable) on behalf of the minor participant named herein, the following:

**ACTIVITIES; RISKS OF PARTICIPATION.** I acknowledge that Laser Ops (as defined below) offers certain Adventures, including laser tag, archery tag and virtual reality games. I understand that each activity involves risk of injury, death or property damage that may be caused by the following, including without limitation: (a) simulated battle in small rooms, spaces and bunkers; (b) achieving mission objectives; (c) anxiety, confusion and mental stress; (d) use of simple tools and equipment; (e) variations in environment, lighting, sound and temperature; (f) bending, crawling, climbing, ducking, hiding, reaching, standing, walking, running, and lifting or moving objects 20 pounds or less; (g) bumping, contacting or impacting other participants and items in the arena; (h) falling, slipping or tripping over items that myself or other participants scatter throughout the arena; (i) getting hit with an arrow, bow string or other items while playing archery tag; (j) my own actions, inactions or negligence; (k) the actions, inactions or negligence of others, including “RELEASEES” (as defined below); (l) defective equipment, falling objects and the condition of the arena, facility or premises; and (m) other dangers, hazards or conditions not presently known or readily foreseeable. I am of sound mind and health. I am physically, mentally and emotionally able to perform all tasks and activities associated with such Adventures in a safe manner. I am not under the influence of drugs or alcohol which endangers others or impairs my ability to maintain safety awareness. I agree to observe and obey all posted rules and warnings, and further agree to follow any oral instructions or directions given by Laser Ops Extreme Gaming Arcade™, its employees, representatives or agents (hereinafter collectively “Laser Ops”). If at any point I believe the conditions to be unsafe, or if I am unfit for any component of participation, I will immediately inform Laser Ops and remove myself from participation. I am aware I may be subject to video and audio monitoring and recording, and group photos. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose as determined at the sole discretion of Laser Ops and its assigns.

**ASSUMPTION OF RISK.** I AM AWARE AND UNDERSTAND THAT EACH ADVENTURE IS A DANGEROUS ACTIVITY AND INVOLVES THE RISK OF SERIOUS INJURY AND/OR DEATH AND/OR PROPERTY DAMAGE. I ACKNOWLEDGE THAT I AM VOLUNTARILY PARTICIPATING IN EACH ADVENTURE WITH KNOWLEDGE OF THE DANGER INVOLVED AND HEREBY AGREE TO ACCEPT AND ASSUME ANY AND ALL RISKS OF INJURY, DEATH OR PROPERTY DAMAGE, WHETHER CAUSED BY THE NEGLIGENCE OF LASER OPS OR OTHERWISE. I consent to receive medical treatment which may be deemed advisable in the event of injury, accident or illness during an Adventure.

**WAIVER AND RELEASE OF LIABILITY.** I HEREBY EXPRESSLY WAIVE AND RELEASE ANY AND ALL LIABILITY OR CLAIMS, OF ANY NATURE, KNOWN OR UNKNOWN, ACCRUED OR UNACCRUED, IN LAW OR IN EQUITY, AGAINST LASER OPS, AND ITS PREDECESSORS, SUCCESSORS, ASSIGNS, INSURERS, PARTNERS, AFFILIATES, SUBSIDIARIES, PARENTS, OWNERS, MEMBERS, MANAGERS, DIRECTORS, OFFICERS, EMPLOYEES, VOLUNTEERS, AGENTS AND ATTORNEYS, IN THEIR OFFICIAL AND INDIVIDUAL CAPACITIES (collectively “RELEASEES”), ARISING OUT OF MY PARTICIPATION IN AN ADVENTURE AND/OR MY USE OF OR PRESENCE UPON THE FACILITIES OF LASER OPS, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERWISE. This document shall be construed broadly to provide a waiver and release of liability to the maximum extent permitted under applicable law.

**INDEMNIFICATION.** I SHALL DEFEND, INDEMNIFY AND HOLD HARMLESS LASER OPS AND ALL OTHER RELEASEES AGAINST ANY AND ALL CLAIMS, CAUSES OF ACTION, DAMAGES, JUDGMENTS, LOSSES, COSTS OR EXPENSES, INCLUDING WITHOUT LIMITATION ATTORNEYS’ FEES AND OTHER LITIGATION COSTS, WHICH MAY IN ANY WAY ARISE OUT OF MY PARTICIPATION IN AN ADVENTURE AND/OR MY USE OF OR PRESENCE UPON THE FACILITIES OF LASER OPS, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERWISE.

**BINDING EFFECT.** This document shall be effective and binding upon my heirs, relatives, executors, administrators and other legal representatives. I further acknowledge and understand that THIS DOCUMENT SHALL APPLY TO EACH AND EVERY OCCASION IN THE FUTURE that I or my child or ward (named herein) visit a Laser Ops facility and/or participate in an Adventure UNTIL I EXPRESSLY REVOKE THIS DOCUMENT IN WRITING.

**I HAVE READ THIS DOCUMENT AND UNDERSTAND IT. I WILL ASSUME ALL RISKS ASSOCIATED WITH EACH ACTIVITY. I UNDERSTAND THAT THIS IS A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY, THAT I AM VOLUNTARITLY GIVING UP SUBSTANTIAL LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE RELEASEES FOR NEGLIGENCE, AND I SIGN IT OF MY OWN FREE WILL.**

\_\_\_\_\_  
Signature of Participant above\*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Participant above

# Only for Campers in Expedition Attending Session 7



Appointment Date and Time: \_\_\_\_\_

Adventure Scenario(s): \_\_\_\_\_

Age (if minor): \_\_\_\_\_

## **MINOR RELEASE AND INDEMNIFICATION BY PARENT OR GUARDIAN (REQUIRED FOR ALL PARTICIPANTS UNDER 18 YEARS OF AGE)**

I certify I am the parent or legal guardian of the minor participant named herein. I understand the nature of each Adventure and the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical and emotional condition to participate in each Adventure. I have read in full and agree to this Waiver and Release of Liability with parental or guardian consent and agree to all terms on behalf of the minor, and for myself, my partner, heirs, relatives, executors, administrators and other legal representatives, I HEREBY RELEASE AND AGREE TO DEFEND, INDEMNIFY AND HOLD HARMLESS LASER OPS AND ALL OTHER RELEASEES FROM ANY AND ALL CLAIMS, CAUSES OF ACTION, DAMAGES, JUDGMENTS, LOSSES, COSTS OR EXPENSES, INCLUDING WITHOUT LIMITATION ATTORNEYS' FEES AND OTHER LITIGATION COSTS, WHICH ARE BROUGHT BY OR ON BEHALF OF MINOR OR ARE IN ANY WAY CONNECTED WITH SUCH PARTICIPATION BY MINOR, WHETHER CAUSED BY THE NEGLIGENCE OF RELEASEES OR OTHERWISE.

I further agree that I will supervise the minor at all times while he or she is participating in each Adventure, and that I will not allow the minor to participate therein while I am not actively supervising the minor.

\_\_\_\_\_  
Signature of Parent or Guardian above\*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Parent or Guardian above

\* When registering at the premises or online from any computer, tablet or mobile device, an electronic signature may be used to sign this document and shall have the same force and effect as a written signature. PARTICIPATION WILL BE DENIED IF THIS DOCUMENT IS NOT SIGNED BY AN ADULT PARTICIPANT, PARENT OR GUARDIAN AT THE TIME AND PLACE OF THE ADVENTURE.

### **\*\*\*NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN\*\*\***

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF THE RELEASEES (AS DEFINED ABOVE) USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM THE RELEASEES (AS DEFINED ABOVE) IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE RELEASEES (AS DEFINED ABOVE) HAVE THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

1. **Camp Hours:** Camp sessions are from 9:00 AM – 4:00 PM. Free extended care is available from 7:00 AM – 9:00 AM and 4:00 PM - 6:00 PM. Camp closes promptly @ 6:00 PM. Starting at 6:01 PM, late fees are \$1.00 per minute per family. **Our 6:00 PM closing time is strictly enforced.** Please note that after 3 instances of being late, the late fee will raise to \$2.00 per minute per family. After 5 instances of being late, the late fee will raise to \$3.00 per minute.
2. **Camp Fee Policy:** At registration, the non-refundable registration fee is due for all families. If you are paying via Camp EFT, no other monies are due at the time of registration. The weekly tuition fee for each session your child is scheduled to attend will be collected the Friday prior to the start of that week, starting on Friday, May 31, 2024 for Session 1. **If you are not paying via EFT, the tuition for all weeks you are enrolling your child in for the summer will be due at registration.** Please note:
  - Spaces are not guaranteed until completed application forms, registration fee, and either an EFT form or your full camp tuition are submitted.
  - There is **NO REFUND** of camp tuition for unused days or sessions. You are obligated to pay for **ALL SESSIONS** you enroll your child in. You may choose to cancel a week at 50% of the weekly tuition until May 29. After May 29 full weekly tuition will be due whether your child attends or not. We cannot give compensation, refunds, or discounts for absences due to illness, vacation, family emergencies, or any other reason.
  - There is a \$5 per week sibling discount available. The discount is off of the second, third, and fourth child attending.
  - There will be a \$25.00 fee for any EFT payments that cannot be processed due to non-sufficient funds, stopped payment, or any other reason. There will also be a \$25.00 fee for returned checks. Families may be placed on **CASH OR CREDIT ONLY** payments at the discretion of the camp if this happens more than once. Families that are moved to Cash or Credit Only will incur an added \$10 fee per session in addition to the 3% credit surcharge (if credit is used). **WE RESERVE THE RIGHT TO REFUSE A CAMPER WHOSE TUITION IS NOT CURRENT.**
  - All payments made via credit card other than the registration fee (including but not limited to the prepay of tuition and other incidental fees incurred by prepay families) are subject to an additional 3% surcharge.
  - Due to limited availability, if you sign your child up for additional programming (CUBBER+, CUBBER Nights, etc.) via a SignUp Genius RSVP or any other way, you will be obligated to pay for said programming whether your child actually attends the event or not. Please only sign up for activities and programming that you know your child will attend. Thank you!
3. **Campus Closures:** If / when the Pinellas County School Board, Emergency Management Services, Florida Dept. of Health, the Governor, or Palm Harbor United Methodist Church leadership determines that school / programs / camp should be cancelled, the facilities are deemed unsafe due to hurricanes, tornados, floods, inclement weather, unsafe building conditions, or unsafe health conditions, or travel to / from Camp CUBBER is deemed unsafe due to any of the above listed conditions, Camp CUBBER will also be CLOSED and no refund, discount, or compensation will be given.
4. **Field Trips:** We do not have control of the weather and there is always a possibility that an outdoor field trip could be rained out, especially during the summer. There are also other circumstances that may occur that are outside of our control (field trip location issue, transportation issue, etc.). Camp DOES NOT have the ability to move or reschedule trips. If possible the cancelled trip will be replaced with a special onsite event. **NO REFUND WILL BE GIVEN DUE TO FIELD TRIP CANCELLATIONS OR CHANGES.**
  - Field trip departure times will be posted on the Week @ A Glance Calendar. Please make sure that your child is here by the appropriate time indicated on that schedule. Campers arriving late may not make their field trip. **Field trip transportation needs are determined at the time of departure.** If your child is not present at the time of departure, the camp considers them ABSENT FOR THE TRIP AND / OR DAY. Due to the size and nature of the program, campers arriving after the departure time WILL NOT be admitted to camp while their group is on a field trip. Campers arriving late cannot be left behind with another group (or left in the office). Campers who miss a field trip departure will not be allowed to be dropped off at a field trip site UNLESS the camp office confirms that adequate transportation back to camp is available. Should you have an issue with a field trip departure time please coordinate IN ADVANCE through the camp office to see if any accommodations can be made. Campers may only be dropped off at camp following a field trip return with advanced notice and authorization. Return times posted on your Camp Activity Schedule may vary due to traffic or safety concerns beyond our control. Should extreme delays occur you will be notified as soon as possible by phone.
5. **Camp Shirts:** Camp shirts MUST be worn on ALL non-swimming FIELD TRIPS. If your child is not wearing a camp shirt on a designated field trip day an additional shirt will be issued. Current year camp shirts will be \$10.00 or prior year shirts will be \$5.00 (while supplies last). The cost of the shirt will be billed to your account. Field trip days will be outlined on your Week @ A Glance Calendar.
6. **Lunch / Snacks:** Campers will need to bring a lunch from home daily (and campers will eat in their classrooms) on Monday - Thursday. Lunches should not need to be cooked, heated, toasted, or refrigerated. We will provide a lunch on Fridays for all campers this summer at no additional cost (included in your tuition). Most of the time it will be a pizza lunch, which will include one or two slices of pizza, chips, fruit or veggie, dessert, and drink. If you feel like that will not be enough lunch for your child, you are obviously welcome to pack a supplemental lunch on Fridays. On occasion, a field trip may be planned on a Friday that impacts lunch service. If that happens, an alternate bag lunch will be provided OR the free pizza lunch will be provided on an alternate day. Please consult the Week @ A Glance Calendar during the summer. Camp will also offer an afternoon snack (also included in your tuition) every day at approximately 3:45 PM. Campers may bring a morning snack from home (if desired). Said snack should be consumed before 9:00 AM and should not need to be cooked, heated, toasted, or refrigerated. If your child has a specific snack or nutrition need please see an office staff with details and note that you may need to provide an alternate snack from home on days where your camper will not want to eat (or cannot eat) the snack provided. For the safety of everyone, Palm Harbor UMC strives to be a “nut free” campus. Please **DO NOT** send your child with lunch or snacks containing peanuts or tree nuts.
7. **Arrival Procedure (Drop Off):** In the morning, we will offer car circle from 7:00 AM - 9:15 AM. This is the preferred way to drop off campers in the morning. Campers will be assigned one of three drop-off locations (based on grade of the child). If there is a line,

camper must remain in their vehicle until driver is able to pull up to the check in staff. Families with campers in multiple age groups may have to visit multiple check-in locations and will want to ensure they have more time allotted for morning drop-off. If your child is not present by 9:15 AM when car circle closes, he / she will be considered absent for the day. If your child has an earlier departure than 9:15 AM for a field trip he / she will need to arrive at the earlier field trip departure time, which will be listed on the Week @ a Glance Calendars.

8. **Departure Procedure (Pickup):** Between 3:45 PM and 6:00 PM you will need to park and come into the building using the double doors underneath the large blue overhang to pick your child up. Again, pick up time should occur between the hours of 3:45 PM and 6:00 PM. Advance notice will be needed if pickup must occur outside of those times. Camp ends promptly at 6:00 PM. Because the pickup process will take longer than in prior years, please be sure to plan accordingly and allow yourself additional time to come into the facility, sign out, and proceed to your child's room by arriving prior to 5:55 PM. Late fees will be strictly enforced this summer.
9. **Dress Code:** As we are a Christian summer camp we expect campers to dress moderately and appropriately. Please no spaghetti straps or mid-drift tops. Tops must be loose fitting and be an appropriate length. **Skirts and shorts should be of a moderate length, going to at least mid thigh. Generally speaking, shorts going to the end of your child's fingertips would be appropriate.** Clothing should be worn as manufactured (not rolled up on the waistband or legs). Shirts may only be "banded" with a rubber band or hair tie if NO PORTION OF THE STOMACH is being revealed. Clothing should not have printing or graphics on it that is inappropriate for a Christian summer camp. If campers choose to wear leggings, yoga pants, bicycle shorts, or other tight fitting bottoms, please note that the top they are wearing must completely cover their backside. **PLEASE NOTE: Closed toed shoes are required at Camp CUBBER everyday.** Camp CUBBER by its nature is full of daily activities that require movement where sandals or other open toed shoes are not appropriate. If your child is not in appropriate attire, you will be called to bring them the needed change of clothes or pick them up. **WE RESERVE THE RIGHT TO REFUSE A CAMPER WHOSE DRESS IS INAPPROPRIATE.**
  - Swimming apparel is to be modest. ALL GIRL'S BATHING SUITS, regardless of age, should be either a ONE PIECE suit or a TWO PIECE "TANKINI" STYLE suit that does not show camper's midsection. If your child does not own such a bathing suit, a dark colored t-shirt must be worn over a suit not following these guidelines at all times. If camper does not have a dark colored t-shirt to wear over said suit, camper will be issued a camp shirt and a \$10 fee will be charged to your account. Boys' bathing suits should be board shorts or long shorts please. Boys are encouraged to wear a rash guard or other swim top. Campers not wearing appropriate swimming apparel may be restricted from swimming.
  - Campers' towel and change of clothes should fit inside the camp issued backpack or bag brought from home. We strongly encourage that each camper wear or bring their own sun block. We cannot allow campers to share sun block due to possible allergies. If your child cannot apply his or her own sun block, please provide a spray or aerosol type. Camp staff can only help apply these 2 types.
10. **Change of Clothes:** Younger campers and those campers prone to bathroom accidents are strongly encouraged to bring a change of clothes with them to camp. If your child has an accident and does not have a change of clothes with him / her, the camp office will issue underwear, shirt, and shorts to wear and there will be a \$5 fee. Brand new underwear will be given to each child, which is yours to keep. The shirt and shorts should be washed and returned to the camp office by Friday of that week or an additional \$10 fee will be charged.
11. **Personal Property:** Campers of certain grade levels are allowed to bring, within reason, portable electronic devices on selected days during the summer. These selected days (and grade levels) will be identified on the Week @ A Glance Calendar. Personal electronic devices include: iPads, Nintendo Switch's, etc. **These items and accessories are the sole responsibility of the camper and must be cared for accordingly. If you are afraid your child will lose their personal items, please have them leave them at home.**
  - If a lost item is found at camp, it will be placed either in a camp "Lost and Found" area or in the camp office (electronic items). Items not claimed by the end of the summer will be discarded or donated. If a camper loses something while on a field trip, it will be the responsibility of the parent / guardian to contact and travel to said field trip location to attempt to collect the lost item.
  - Games, apps, and music on personal electronic devices should be **appropriate for play at a Christian summer camp** and may be checked randomly for appropriateness.
  - **Camp CUBBER and its staff WILL NOT be held responsible for lost, misplaced, damaged, or stolen monies or other personal property.** If there is an issue of possible theft or another situation where it is deemed necessary by camp management, campers' personal belongings may be looked through by a camp supervisor. If there are things campers would like to be kept personal or confidential, please leave these items at home. Any items with a dispute of ownership will be held in the camp office until a parent from each child has arrived.
12. **Cell Phones:** Cell phones are NOT needed at camp and we find they often detract from the overall camp experience. However, should you opt to allow your camper to bring a cell phone to camp, please be advised of the following:
  - Cell phones are not permitted for our Bear Pack campers and are strongly discouraged for our Expedition campers.
  - Care and responsibility for a cell phone brought to camp is the sole responsibility of the camper bringing it. **Camp CUBBER and its staff WILL NOT be held responsible for lost, misplaced, damaged, or stolen cell phones.**
  - Camper cell phones should only be used on camp appropriate days, at camp appropriate times, for camp appropriate activities. Camper cell phone use should only occur on specified electronics days (marked as such on the Week @ A Glance Calendar). On those days, cell phones should only be used during before / after care, free time, game room time (or similar), or to / from a field trip location (or for pictures while at the field trip location). Cell phones should NOT be used during regular camp classes like Art, Science, Sports & Rec., Outdoor Active Play, Creative Reading & Writing, etc. If campers elect to bring a cell phone on a non-electronic day, cell phone should be left on silent and in the camper's backpack.

- Camp appropriate cell phone activities would include things like playing appropriate games, playing appropriate music, and taking pictures. Pictures taken on a camper's personal cell phone (as part of camp) should be for personal use only and not be posted on social media.
  - As with all electronics, all games, apps, and music should be **appropriate for play at a Christian summer camp** and may be checked randomly for appropriateness.
  - Activities that would be inappropriate for camp cell phone use would include: social media of any kind (Facebook, Instagram, Snapchat, TikTok, etc.); video streaming of any kind (YouTube, Netflix, Hulu, etc.), phone calls / text message / or other direct messaging (even to communicate with a parent or family member), and surfing or searching the internet. Please note that if you need to contact your child during the camp day, the appropriate method would be to call the camp office to speak with him / her. Also, please note that all camp staff will have a cell phone and / or another communication device in case of emergency.
  - Campers who are using their cell phone on an inappropriate day (non-electronic day) or during an inappropriate class will be told to put it away in their backpack. If campers do not comply with that request (or cell phone is being used again on an inappropriate day or during an inappropriate class), **CELL PHONE WILL BE CONFISCATED** and kept in the office for a parent to pick up at the end of the day. If campers are using cell phone for inappropriate uses (as listed above), **CELL PHONE WILL BE CONFISCATED** and kept in the office for a parent to pick up at the end of the day. If inappropriate use of any form continues, camper will no longer be allowed to bring a cell phone to camp and **may face the discipline action stated in the Code of Conduct (See #17).**
- 13. Faith Content: Camp CUBBER is a Christian summer camp, and a ministry of Palm Harbor United Methodist Church.** While at camp, children will encounter a level of exposure to the Christian faith and its values. Students are encouraged to grow their faith and are given core principles (typically through the Orange Curriculum, 2-5-2 Basics Curriculum, and others) that focus on KEY CHRISTIAN VALUES such as Compassion, Determination, Fairness, Generosity, Gratitude, Honesty, Hope, Love, Obedience, and many more. Other forms of faith content include: kid's praise and worship songs, Bible stories, instructor led, student led or group style prayer over food, Christian themed literature during reading times, and participation in faith based activities (which also could include Bible stories, Bible verses, and modern life stories of followers of Christ). We seek to provide a positive Christian environment and experience at Camp CUBBER and we understand that not all of our families share our beliefs. Campers should not be forced to sing, pray, etc. by a group leader or staff member, but please note that we DO NOT provide alternate accommodations to remove campers of varying faiths during those times where elements of the Christian faith will be encountered.
- 14. Movie Policy:** All campers may view **G and PG rated movies as part of regular camp activities.** Selected and screened PG-13 movies may be made available from time to time to **6th - 8th GRADE CAMPERS ONLY.** There will always be a PG or G alternative if a PG-13 movie is being shown. Movie selections will be made and posted / emailed in advance. If at any time there is a specific movie you would like your child not to see, please inform his / her group leader or a Camp CUBBER office staff.
- 15. Camper Health:** Campers who are ill, whether the illness is communicable or not, should not attend camp. Campers who exhibit any signs of illness (including, but not limited to a fever) will not be admitted to camp. Campers who develop a fever, or exhibit any other signs of illness during the camp day, will need to be picked up from camp immediately. As a parent I understand that I must pick up (or make arrangements to have my child picked up) within 1 hour of being notified of my child becoming ill. Campers who inform camp staff of any illnesses or symptoms (whether verifiable or not) will also fall under this category and will need to be picked up.
- Similar to Pinellas County Schools, Camp CUBBER has a "no-nit" policy. Anyone with live lice or nits will be sent home from camp until all nits and lice are removed. Campers will be checked upon returning to camp. Camp CUBBER may also check for suspected cases of lice, check entire groups where suspected or actual cases have been reported, and / or do random lice checks as deemed necessary or appropriate by camp administration. If you discover your child has lice, please inform the camp office right away.
- In addition, please note that campers who test positive for COVID-19, or any communicable disease, will need to remain out of camp for the time period recommended by the CDC and / or Florida Dept. of Health. Campers who have been exposed to COVID-19 will not be required to isolate, as long as that exposure is not ongoing. If exposure occurs inside the home and the camper is not able to isolate from the person(s) with COVID-19, camper will need to remain out of camp until exposure has ended (everyone is healthy again). The decision to wear a face mask for staff, campers, and parents / guardians will again be optional. That said, while it currently seems unlikely, as this situation is still "fluid", the face mask expectations could change throughout the course of the summer. I agree to comply (and have my child comply) with all current camper health expectations.
- In light of the ongoing COVID-19 situation, we have designed our campus to be as safe as possible and taken into account current guidelines and regulations. As a church, we have taken additional steps in the planning and implementing of all of our ministries that we hope will keep all children, families, and staff safe and protected from potential exposure to this or any other illness. With that said, there is no guarantee that illness will not occur when deciding to enroll your child in a program like ours where he / she will be around other children and staff members and where parents / guardians will be around others while picking up. Please be advised that there is a certain amount of calculated risk you are assuming by enrolling your child in camp 2024. You should evaluate your own risk as you determine whether or not to enroll your child. In line with CDC guidelines, we specifically do not recommend individuals at high risk with severe underlying medical conditions enroll (or be utilized as pickup persons). If there is a case or cases of COVID-19, Camp CUBBER will follow the recommendations of the Florida Department of Health. PHUMC, including Camp CUBBER, disclaims all liability for COVID-19 on our property.
- 16. Photo Release:** As parent and / or legal guardian, I give permission to Palm Harbor United Methodist Church and any of its ministries or aliases (Camp CUBBER, Stars and Comets, etc.) to reproduce and publish photographs taken of my child for any necessary or appropriate camp or church related publicity purposes which may include, but are not limited to printed publications such as brochures and newsletters, digital images, website, videos and social media. I acknowledge that neither the minor children nor I will receive financial compensation for any such publications.

17. **Code of Conduct / Discipline and Expulsion Policy: Reasonable rules and regulations are essential to ensure each child's safety and allow each child to experience full enjoyment of our program. PLEASE REVIEW THE PROGRAM'S CODE OF CONDUCT AND DISCIPLINE POLICY WITH YOUR CHILD. Please note that physical punishment will not be used in any form at Camp CUBBER. We will not subject your child to discipline that is severe, humiliating, or frightening. Neither will we associate discipline with food, rest, or toileting.**
- a. Camper will stay with camp staff in assigned area & must have consent from staff to go to another area. Camper will not wander or leave the group at any time without prior permission.
  - b. Camper will show courtesy, respect, and good manners toward fellow campers and staff members.
  - c. Camper will not lie or intentionally mislead staff or other campers.
  - d. Camper will not use abusive, crude, obscene, sexual, or inappropriate language, writing, or gestures.
  - e. Camper will not bring items (books, magazines, electronic devices, etc.) with abusive, crude, obscene, sexual, or inappropriate language, writing, gestures, or displays with them to camp. Camper will not seek out abusive, crude, obscene, sexual, or inappropriate language, writing, gestures, or displays on camp or personal computers or electronic devices.
  - f. Camper will not exhibit "bullying" behavior. Camp CUBBER defines "bullying" behavior as a repetition, pattern, or combination of any of the following behaviors: name calling, shaming, intimidating, targeting, being aggressive towards another student, or ostracizing / excluding / isolating another student.
  - g. Camper will keep hands and feet to themselves. No kicking, hitting, pushing, inappropriate touch, etc. - ABSOLUTELY NO FIGHTING.
  - h. Camper will be respectful of property belonging to camp and fellow campers. Camper will not break or damage property through intent, malice, or careless behavior. *Parent / Guardian will be responsible for payment of any damaged or destroyed property.*
  - i. Good sportsmanship and fair play must be displayed at all times.
  - j. Camper will not bring violent toys or instruments or items that could be used as such.
  - k. Camper will respect other camper's "personal space".
  - l. Camper will abide by all bus / van safety rules:
    1. Camper will remain seated and have SEAT BELT BUCKLED AT ALL TIMES
    2. Camper will exit bus / van ONLY as the driver or staff member directs
    3. Camper will remain in assigned loading area and will not enter bus / van until the driver or camp staff member indicates it is safe to do so
    4. A quiet voice will be used at all times – NO YELLING
    5. Camper will sit in assigned seat if designated or if the driver appoints one
    6. Camper will refrain from eating and drinking while on the bus / van

We seek to set appropriate limits and utilize positive techniques to encourage and guide our campers' behavior. That can be seen in a variety of ways, particularly through positive reinforcement and public recognition of positive behavior, the use of the treasure box or other reward systems, and the use of our camp wide bear bucks / auction points behavior system.

**FAILURE TO OBEY THE ABOVE RULES WILL RESULT IN A PROGRESSION OF DISCIPLINARY ACTION DEEMED APPROPRIATE BY CAMP STAFF / ADMINISTRATION.** The disciplinary action will be based on the severity of the camper's action / incident that occurred. Should behavior be extreme or repeated, multiple steps will likely be skipped.

**DISCIPLINARY ACTION MAY INCLUDE THE FOLLOWING:**

- a. Verbal warning(s) and / or redirection
- b. A period of "time out" (in view of staff member) which may include missed time during a field trip / special activity or being relocated to an alternate group for a brief period of time
- c. A one on one behavior discussion with the group leader or administrator
- d. A written notice with details of behavior, requiring parent / guardian signature
- e. A parent conference with the Director by phone
- f. Camper may be moved to a different class / group for a period of time to be determined by the Director
- g. When it is deemed necessary by administration, a parent / guardian may be called to take the camper home. Parent must pick up within one hour of being notified of behavior and need for pickup.
- h. An in-person parent conference with the Administrator or Director, group leader, and camper
- i. Camper may be suspended from the program for one (1) to five (5) days. Length of suspension will be determined by the Director based on the behavior, situation, and any other circumstances.
- j. If the camper cannot be kept safe in our care, the camper is jeopardizing the safety of other campers in our care, the camper has shown repeated issues with the same behavior regardless of consequence(s), or a behavior / action (or progression of behaviors / actions) is deemed extreme the camper may be expelled from the program at the discretion of the Director
- k. Any behavior that is deemed malicious, violent, sexual, or results in physical and / or property damage may result in advanced stages of discipline, including, but not limited to, immediate suspension or expulsion from the program (to be determined by Director)
- l. Should a camper be sent home early, suspended or expelled from camp, there will be no refund of tuition or cost reduction for time or days missed. For campers who are expelled from the program, no additional payments should be collected or due after the date of expulsion.
- m. **Campers who reach advanced stages of disciplinary action or display repeated inappropriate behavior (receiving multiple written behavior notices) may not be eligible for enrollment in future summers.**

**Camp CUBBER and its staff / administration reserves the right to implement any of the above steps deemed necessary, based on the severity of the behavior or actions taken by the camper.**

The signature page for the acknowledgment and acceptance of the fees, policies, conduct / discipline, and releases is found on the fourth page of this camp 2024 registration packet. Thank you!