

# SPRING BLAST REGISTRATION 2021

<b>Camper Info</b>	Camper First Name		Camper Last Name		
	Address		City	State	Zip Code
	Camper Date of Birth	Camper Age Now	Current Grade		Gender
	Camper Home Church		Home Church City		Home Church State
	Parent/s Name		Preferred Parent Email		
<b>Family Info</b>	Mother's Cell Phone		Father's Cell Phone		
	Emergency Contact Name ( <i>other than parent</i> )		Emergency Contact Phone	Emergency Contact Relation	
	<b>SPRING BLAST FEES:</b> \$30 per camper, \$5 for accompanying adults – Adults bringing more than eight campers are FREE! <i>*Please add \$5 if registering less than one week before April 10, 2021.*</i>				
<b>Payment Info</b>	Method of Payment				
	<input type="radio"/> Check <input type="radio"/> Money Order <input type="radio"/> Visa <input type="radio"/> Mastercard <input type="radio"/> Discover <input type="radio"/> Other:				
	Credit Card Number		Name on Credit Card		
	Expiration Date	Card Verification Code (3-digit, on back)		Amount to charge to card today	
				\$	
<b>Health Info</b>	List any physical limitations Riverside staff should be aware of:				
	List any specific dietary limitations or restrictions that apply to your camper:				
	Allergies to be noted:				
	Describe any medical conditions that our Riverside staff should be aware of:				
	<b>Parent/Guardian:</b> I give my permission for this youth to participate in the Spring Blast and agree to read and sign the All Camp Acknowledgement and Liability Waiver on the second page of this document.				
Parent/Guardian Signature				Date	

## SPRING BLAST NEED-TO-KNOW

- Arrival is between 9:00-9:30 AM on Saturday, April 10.
- Drop-off and pick-up instructions will be emailed.
- Make a deposit in the store ahead of time or bring cash.
- The Blast ends at 4:00 PM on Saturday, April 10.
- Bring your Bible, pen/pencil, paper, wear warm clothes.
- No cell phones allowed! Leave all valuables at home.



Send completed registration form to:  
**Riverside Lutheran Bible Camp**  
 3001 Riverside Road, Story City, IA 50248  
 or scan/email to RLBC@RiversideLBC.org



## PARTICIPANT AGREEMENT, RELEASE, and ACKNOWLEDGEMENT OF RISK

In consideration of the services of Riverside Lutheran Bible camp, their agents, officers, volunteers, participants, employees, and all other persons or entities acting in a capacity on their behalf (hereinafter collectively referred to as "Riverside", I hereby agree to release and discharge Riverside, on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that activities through Riverside can entail known and unanticipated risks which could result in physical or emotional injury, illness, paralysis, death, or damage to self, to property, or third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. The risks include, but are not limited to: Collision with boats, trees, walls, or other fixed objects; falling; my own equipment failure or the failure of other's equipment; my own or other's negligence, objects or conditions on the natural surface that may cause me to fall, broken bones/sprains; head, neck and back injuries; abrasions; and bruises; illness through unknown exposures (ex. COVID-19), etc. Furthermore, Riverside employees have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness, risk factors, or abilities. They may give inadequate warnings or instructions, and the equipment being used may malfunction.
2. I expressly agree and promise to accept and assume on behalf of myself and/or participating family members all the risks existing in this activity. My consent to having myself or participating family members take part in this activity is purely voluntary and I expect to participate and/or consent despite risks.
3. I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Riverside from any and all claims, demands, or causes of action, which are in any way connected with my or my family members participation in Riverside's activities, use of Riverside's equipment or facilities, including such claims which allege negligent acts or omissions of Riverside.
4. Should Riverside or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
5. I certify that I have adequate insurance to cover any injury or damage I or my participating family members may cause or suffer while participating or conditions which could interfere with the safety in activities, or else I am willing to assume - and bear the costs of - all risks that may be created, directly or indirectly, by any such condition.
6. In the event that I file a lawsuit against Riverside, I agree to do so solely in the state of Iowa, and I further agree that the substantive law of Iowa shall apply in this action without regard to the conflict of law rules of this state.
7. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portion shall remain in full force and effect.

By signing this document, I agree that if anyone is hurt, becomes ill, or property is damaged during my or my family members participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against Riverside based on any claim from which I have released them herein. By my signature, I hereby agree, release, and acknowledge risks on behalf of those family members participating at Riverside, which may include but is not limited to myself, my spouse, and my dependent children.

To the best of my knowledge, all registration and/or health information provided for the participant/s described is correct. I consent for myself and grant permission for participating family members to take part in all camp activities except as otherwise noted. I authorize the medical personnel or staff selected by the camp director to secure any medical or emergency treatment deemed necessary for the camp participant. I also grant permission for photos and images obtained while at camp to be used in Riverside publications and/or promotional videos.

I have had a sufficient opportunity to read/review this entire document. I have read and understood it, and I agree to be bound by its term for myself and all those in my participating party.

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Signature of Participant or Parent/Guardian if under 18 years of age

Date

Signature