



Critter Camp Application

June 20-22

July 18-20

August 15-17

Please complete all sections below. Use blue or black ink and print clearly.

Camper Information:

First Name: _____ Last Name: _____

Age: _____ Date of Birth: _____ Gender: Male / Female

Residence Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address (if different from above): _____

Phone Number: _____ Cell Phone: _____

Will you be attending with a friend or sibling: Yes / No

If Yes, please provide First and Last Name: _____

Parent/Guardian Information:

First Name: _____ Last Name: _____

Relationship: _____ E-mail Address: _____

Residence Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address (if different from above): _____

Phone Number: _____ Cell Phone: _____

Emergency Contact (other than Parent/Guardian)

Name: _____ Relationship: _____

Phone Number: _____

Alternate persons other than parents to whom your child may be released:

Only the Parent/Guardian whose name is reflected on the application will be permitted to pick up the camper. You may authorize a representative (below) to pick up or drop off your child. The alternate will be required to sign your child in and/or out and provide a valid driver’s license for identification.

Name: _____ DL#: _____ Phone: _____

Name: _____ DL#: _____ Phone: _____

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Camper’s Health History:

Physician’s Name: _____ Phone Number: _____

Health Insurance: _____ Policy/Group Number: _____

Dentist’s Name: _____ Phone Number: _____

Hospital Preference: _____

Current Medications: _____

Allergies: _____

Additional Health Info/Concerns: _____

General Camp Information:

The Critter Camp will be held June 20-22, July 18-20, and August 15-17. Camp hours will be from 10 am to 2 pm with a 30-minute meal break. There will be a **NON-REFUNDABLE** fee of \$50 due with the submission of this application. This fee includes snacks provided for each camp day, a T-shirt, educational materials and just a ton of fun.

Please indicate which Critter Camp session your child is interested in attending:

June 20-22 July 18-20 August 15-17

Ways to submit your Critter Camp Application:

Mail all 6 pages with check to:

Rogue Valley Humane Society PO Box 951 Grants Pass, OR 97528

Email a scanned application to: vcoordinator@roguevalleyhumanesociety.org and you will be sent a PayPal invoice to pay online

Drop off at our physical location (we can take cash/check/card on site):

Rogue Valley Humane Society 429 NW Scenic Dr. Grants Pass, OR 97526 Hours: 12PM to 3PM

Photo Release

I, the undersigned parent, or guardian of the camper listed on this application, hereby agrees that any photographs, videos, and/or images taken of my child during the Critter Camp may be used by Rogue Valley Humane Society for publicity, education, fundraising, or marketing purposes. I understand that I will not receive any monetary compensation for the use of said photograph(s) and/or video footage to be used in print or on the Rogue Valley Humane Society website.

Parent/Guardian: _____

Date: _____

Assumption of Risk and Waiver of Liability

In consideration of permission granted my child by Rogue Valley Humane Society (RVHS) to participate in Critter Camp, as a camper, I release and discharge RVHS, on my own behalf and on behalf of my child from all claims, demands, actions, judgments, and executions which the undersigned ever had nor now has, or may have in the future, or which the undersigned heirs (including but not limited to my child), executors, administrators or assigns may have, or claim to have, or have in the future, against RVHS, its successors or assigns, for all personal injuries, negligence claims, emotional distress and claims for damages known or unknown as well as injuries to property, real or personal, caused by or arising out of the above-described Critter Camp. I understand the risks associated with such animals, including but not limited to bites, scratches, diseases, and possible parasites. This waiver, release of liability and assumption of risk agreement is executed without any reliance upon any representation of any person or RVHS, and I have carefully read and understand the contents of this agreement, and I execute the same as my own free act. I understand fully the significance of this agreement. I understand that by signing this agreement, I am waiving on my own behalf, and on behalf of my child, any potential claims against RVHS arising out of the Critter Camp event.

In the event I cannot be reached for an emergency, I hereby give permission to the medical personnel selected by RVHS staff and/or emergency personnel to order any necessary treatment and transportation for my child. I agree to be financially responsible for all such medical treatment and any incurred expense related to such medical treatment.

Signature of Parent or Legal Guardian: _____

Date: _____

COVID WAIVER AND RELEASE OF LIABILITY

To be completed by all Camp/Event Participants

This COVID Release and Waiver is in addition to, and does not replace, any other releases of liability, waivers or documents that have been executed in connection with this Event.

Assumption of Risk: You acknowledge that you are aware that participants in the camp/event taking place at Rogue Valley Humane Society on the dates of June 20-22, July 18-20, or August 15-17 are not required to prove immunization against COVID or to wear masks, unless required to do so by state or local guidelines, in order to participate or attend the Event, and that certain risks associated with exposure to COVID may exist at the Event.

For Parents/Legal Guardians of Minors - As the parent or legal guardian of the camper listed in this application, by allowing the Minor to participate in the Event, and by signing this COVID Waiver and Release of Liability, I, on my own behalf and/or on behalf of the Minor, am assuming all risks, responsibility and liability concerning Minor's and my health and safety and possible exposure to COVID in connection with the Event.

Release: In consideration for the privilege of Minor participating in the Event, the sufficiency of which is hereby acknowledged, I, on my own behalf and/or on behalf of the Minor, agree to release and to hold harmless Rogue Valley Humane Society, the hosting site, on whose premises the Event will occur, representatives, employees and contractors of the preceding parties (hereinafter collectively "Releasees") from any and all liability, whether caused by negligence of the Releasees or otherwise, for any claim, judgment, loss, liability, cost and expenses (including, without limitations, attorney's fees and costs) arising out of or connected with associated with Minor's participation in the Event and Minor's and/or my possible exposure to COVID.

I, on my own behalf and/or on behalf of Minor, hereby warrant that I have read this COVID Waiver and Release of Liability in its entirety and fully understand its contents. I, on my own behalf and/or on behalf of Minor, am aware that this document releases Releasees from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury, illness and death. I, on my own behalf and/or on behalf of Minor, have signed this document voluntarily and of my own free will.

Signature of Parent or Legal Guardian: _____

Date: _____

Minor Name: _____

Relationship to Minor: _____

Questions For Campers

Let us know a little bit about your animal experience. If you need more space, use the back of this paper or another piece of paper and be sure your name is on it so we can match it to your application.

What animals have you had? _____

Do you help take care of any animals? If so how? _____

Tell us why you want to go to Critter Camp: _____

