



Camper Last Name:

Camper First Name:

Camper Middle Name:

Camper Preferred Name:

2025-2026 School Attended:

2025-2026 Grade Completed:

County

Biological Sex

T-Shirt Size

Birthdate

Age on first day of camp:

Postal Address :

City :

State:

Zip Code:

Primary Email for Camp Correspondence :

Primary Phone Number for Camp Correspondence :

I agree to receive text messages at the Primary Phone Number

Phone Parent/Guardian #1 Name :

Phone :

Email :

Parent/Guardian #2 Name:

Phone:

Email:

Emergency Contact and Pick-Up Other than Parent/Guardian #1 :

Relationship to Camper :

Phone :

Emergency Contact and Pick-Up Other than Parent/Guardian #2:

Relationship to Camper:

Phone:

Approved to pick-up my child (other than previously listed):

Relationship to camper:

Phone:

Camper's Physician Name:

Camper's Physician Number:

Does the participant have health insurance coverage?

IF YES, upload front and back of participant's health insurance card

If military, provide covered individual information and account number:

The more we know about a child, the better we can make the camp experience for that child. Camp Horsin' Around specializes in youth with challenges so no need to worry about your child being labeled or restricted in any way. Information from this section will allow us to prepare all reasonable accommodations and ensure we have appropriate staffing and equipment ready.

BEHAVIORAL

Please list any mental, emotional, or physical behaviors that require ongoing treatment, medications, interventions, or care.

MEDICAL/PHYSICAL

Please list any conditions, illnesses, behaviors, etc. that require ongoing treatment, medications, observation, or care.

ALLERGIES

Please list all known food, medicine, and environmental allergies and any care required.

DIETARY

Vegetarian

Vegan

Dairy Free

Egg Free

Peanut Free

Sugar Free

Gluten Free

No Red Dye

No Beef or Pork

Halal

Keto Diet

OTHER

Please list any other accommodations or considerations requested.

PERMISSION TO TREAT Parent Initials

The health history reported above is correct and complete to the best of my knowledge. I give permission for the camp Health Care Provider to provide routine health care, provide over the counter medication, assist in administering camper's prescription medications, and seek emergency medical treatment including ordering x-rays and routine tests. I agree to the release of any records necessary for treatment, referral, billing, or insurance purposes. I give permission for the camp to transport my child to/from off-site medical care when recommended by the HCP. I understand Camp Staff will attempt to contact me if HCP recommends off-site treatment for my child. In the event I cannot be reached in an emergency, I hereby permit the physician selected by the camp to secure and administer treatment.

The following over the counter medications may be administered to my child without contacting me (check all that apply):

Acetaminophen (Tylenol)

Antacid (Tums, Alka Seltzer, omeprazole, etc.)

Antihistamine (Zyrtec, Benadryl, etc.)

Decongestant (Sudafed, Mucinex, etc.)

Dramamine (motion sickness)

Hydrocortisone cream (anti-itch topical)

Ibuprofen (Advil)

Polysporin (topical antibiotic)

INDEPENDENT CHILD STATEMENT

Please check each statement to verify your child meets the following requirements:

My child can maintain his/her personal hygiene, dress, toilet, and rest/sleep without assistance.

My child can understand, follow, and respond to verbal/written instructions and understand/respond safely to dangerous conditions.

My child can live in a group environment, participate in group activities, maintain up to a 15-hour summer day (outdoors) schedule, and take medications as prescribed by a preset schedule, all with minimal assistance.

By checking here, I acknowledge my child is capable of all of the above and a caretaker is not needed. If the child is unable to do any of the above, I acknowledge I will have to pick my child up early from camp and no refunds will be given.

If your child needs assistance in any of the above areas, please contact us at ex.director@camphorsinaround.org to discuss if attendance with a caretaker is possible.

PERMISSION TO PARTICIPATE

I understand camp involves physical and recreational activities that involve risk and may result in injury or death. I assume responsibility for all risks, known and unknown, involving my child's participation in all camp activities. Risks may include, but are not limited to, recreational games; traditional camp activities and classes; transportation accidents; weather-related hazards; natural disasters; wild animals, plants, and insects; infectious diseases; injuries or death caused by the use of

equipment, materials, or facilities; environmental conditions; acts and omissions of others; and the unavailability of immediate and adequate emergency medical care. I hereby indemnify and hold harmless Camp Horsin' Around and all related parties from any liability, losses, costs, damages, claims or causes of action of any kind or nature arising from or related in any way to my child's participation in camp.

MEDIA PERMISSION

I grant Camp Horsin' Around the right to use, reproduce, assign, and/or distribute still photographs, video and sound recordings of myself and my minor child without compensation for use in promotional or educational materials in any media format. Campers will not be identified by name without the written permission of the child's parent/guardian(s).

Yes, I give permission

No, I do not give my permission

PICK-UP PERMISSION

I understand it is my responsibility to arrange to pick up my camper upon request or upon the conclusion of camp. I understand it is my responsibility to inform everyone approved to pick up my child on this release form (Parent/Guardians, Emergency Contacts, Approved Pick-Ups) they MUST present a driver's license or photo ID before camper will be released. No camper may be released to an adult not listed on the registration form nor to anyone without a photo ID.

REQUIRED ON-LINE ORIENTATION

I agree that my child and at least one parent/guardian will complete any orientation materials or meetings provided prior to attendance at camp. I understand I will be required to document our review of those materials and my camper's participation in camp is contingent upon completion of the materials by the deadline that will be provided. In the event camper does not complete the orientation materials on time, camper will be unable to attend camp and no refunds will be given.

CAMPER CODE OF CONDUCT AND EXPECTATIONS

The following rules apply to all campers. Parent/guardians must agree their minor child will abide by the following while at camp and agree breaking any of these rules is grounds for dismissal from camp. Parent/guardian agrees to pick up minor child within 8 hours after being notified child must depart camp for disciplinary reasons. Parent/guardian agrees to read and review all these rules with minor child prior to attendance at camp.

1. Campers are not permitted to have cell phones at camp. Medical exceptions are possible but must be cleared with CHA Camp Director.
2. Absolutely no phone calls will be made by campers without permission of Camp Director.
3. Electronics of any kind other than medical necessities are not allowed at camp.
4. No alcohol, illegal drugs, fireworks, weapons, or any articles perceived to be weapons are permitted on the campground.
5. Campers and volunteers (under 21) are not permitted to use tobacco, vape products, or anything similar on the campground. Volunteers 21 and over may use these products in designated areas on the campground.
6. All medications of any kind must be turned in at registration to be kept at the HCP's office for the duration of camp and accompanied by a medication form describing administration.
7. Accidents, illnesses, minor injuries, etc., should always be reported to camper's Adult Counselor.
8. Campers may not stay in a cabin during classes or activities. If camper is unable to participate in activities, camper must stay at the Band-Aid Barn with the HCP until released by HCP.
9. Swimming, boating, fishing, or any other waterfront activity is not permitted except during designated times with required safety supervision.
10. Campers must remain with the groups to which they are assigned and must obey the rule of 3 when traveling. Individual campers are not allowed on trails, near water, in cabins, at activities, etc. at any time.
11. Campers may not leave the grounds at any time without permission of the Camp Director. If youth are being picked up, Camp Director must be notified in advance, and camper must check out at the camp administration building prior to departure.
12. Visitors to camp are not allowed during a camp session without prior knowledge of CHA Camp Director. Visits must be scheduled and approved prior to the camp session by contacting camp.director@camphorsinaround.org.
13. Campers are not permitted to be on or near any maintenance equipment.
14. Campers may not ride in camp vehicles unless specifically authorized to do so by CHA Camp Director or her designee.
15. Campers may only enter the interiors of the cabins to which they are assigned. Visiting another cabin's screened porch area is allowed.
16. Campers are to be where they are assigned to be by the schedule at all times. Participants are to be in cabins with lights out and quiet as designated on the camp schedule.
17. Campers are to be courteous, attentive, and responsive to all adults, staff, teen volunteers, instructors, and counselors at all times. This includes during presentations of information regarding safety, conduct, instructions, etc.

18. Obscene, discriminatory, and/or inappropriate language or dress, roughhousing, and insubordination are not acceptable at any time and may result in dismissal from camp.
19. Bullying, hazing, pranks, and other behaviors/language disrespectful to other campers, teens, staff, and/or volunteers (e.g., shaving cream, defacing property, inappropriate use of social media/electronics, slurs, intimidation, etc.) will not be tolerated and may result in dismissal from camp.
20. All incidents of serious misconduct (e.g., fighting, bullying, threats, disregard for the safety of others, vandalism, etc.) will be reported to the Camp Director. Such incidents may result in campers' dismissal from camp.
21. Campers are to follow the directions of camp staff, teen and adult leaders, counselors, instructors, and volunteers. This includes daily duties keeping the grounds clean and KP duty in the dining hall. Youth will participate in the daily cleaning of and assist in maintaining order within cabins and camp buildings used.
22. Campers will respect camp property. Any willful damage as a result of horseplay, inappropriate use, graffiti, etc., will be paid for by the camper/camper parent or guardian.
23. Camp is not responsible for the personal property of any camper, volunteer, or employee.
24. Campers will follow the dress code as provided in the orientation prior to camp. Repeated violation of the dress code is grounds for dismissal from camp.
25. Campers will convey any issues with the facility, arrangements, other individuals, food, activities, or any other part of camp to the camper's Adult Counselors or CHA Staff in a timely manner if adjustments or change is requested. Camp staff and volunteers cannot fix problems of which they are unaware so youth must speak up and advocate for themselves.

By checking here, I agree the breaking of any of the above rules may be grounds for dismissal from camp. I agree if my child is dismissed from camp for disciplinary reasons, I or my designee (ONLY Parent/Guardians, Emergency Contacts, and Approved Pick-Ups listed in registration form), with a photo ID, will pick up my child from Camp Horsin' Around within 8 hours of notification. I understand there is no refund of any portion of the camp fee once the deadline for camp refunds has passed, including if my child departs camp early for disciplinary, medical, or any other reason.