

**KIWANIS KEY LEADER - AUTHORIZATION TO ATTEND EVENT
EMERGENCY MEDICAL TREATMENT AUTHORIZATION**

Please type or print all information: This form is required for all participants attending events. This form must be completed by a parent, legal guardian, or person *in loco parentis* for the youth participant.

Participant Name _____ Last name First name Middle Initial Mailing Address _____ Street Address _____ City State/Province Postal Code Country Gender _____ Height _____ Weight _____ Birth Date Month: _____ Day: _____ Year: _____ E-mail Address _____ School Name: _____	<u>Low Ropes Initiatives/Activities:</u> I hereby affirm that I have been well advised and thoroughly informed of the inherent hazards and policies of participating in initiatives/activities, including low ropes. I know that I am participating in a potentially hazardous activity. I should not participate unless I am medically able. I hereby personally assume all risks associated with my voluntary participation in this event for any harm, injury or damage that may befall me as a result of my participation, whether foreseen or unforeseen. I must recognize the importance of following the leader's instructions, and know that safety rules and procedures must be obeyed. I know that participation is by choice, and have been advised of the dangers and risks. <u>Travel:</u> Parents/Guardians of Key Leader participants are responsible for the transportation to/ from the event. It is recommended that the guidelines from the student's school/sponsoring organization should be followed. KI is not responsible for transportation, and shall be held harmless for any liability arising from transportation to and from a Key Leader event. Participant Signature _____ Parent/Legal Guardian _____																								
Emergency Information In case of emergency, contact: _____ Daytime phone _____ Alternate contact _____ Daytime phone _____ Relationship to participant: _____ Evening/cell phone _____ Relationship to participant _____ Evening/cell phone _____																									
Medical Information Health Insurance Company _____ Policy Number _____ Group Name on Insurance Coverage _____ Telephone number or other contact information shown on insurance card _____ Will the Key Leader participant be taking any prescription medication or over-the-counter drugs of any type? _____ If yes, please explain _____ Has he/she ever been or currently being treated for (circle "Yes" or "No")? <table style="width: 100%; border: none;"><tr><td>Nervousness?</td><td>Yes No</td><td>Rheumatic Fever?</td><td>Yes No</td><td>Asthma?</td><td>Yes No</td></tr><tr><td>Convulsion or epilepsy?</td><td>Yes No</td><td>Cancer or tumors?</td><td>Yes No</td><td>Diabetes?</td><td>Yes No</td></tr><tr><td>Heart Condition?</td><td>Yes No</td><td>Headaches?</td><td>Yes No</td><td>Allergies to medication?</td><td>Yes No</td></tr><tr><td>High Blood Pressure?</td><td>Yes No</td><td>Fainting Spells?</td><td>Yes No</td><td></td><td></td></tr></table> List any allergies or other medical conditions of which we need to be aware _____ For routine first aid needs, list any O-T-C medications that the Key Leader Participant may NOT take _____		Nervousness?	Yes No	Rheumatic Fever?	Yes No	Asthma?	Yes No	Convulsion or epilepsy?	Yes No	Cancer or tumors?	Yes No	Diabetes?	Yes No	Heart Condition?	Yes No	Headaches?	Yes No	Allergies to medication?	Yes No	High Blood Pressure?	Yes No	Fainting Spells?	Yes No		
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I am the parent or legal guardian for the above-named Key Leader participant, and give my permission for him/her to attend the weekend retreat, sponsored by Kiwanis International. I also have read and understand the Community Values Agreement, and I understand that a violation of certain provisions of these rules may result in the dismissal of my Key Leader participant from the event. I hereby certify that the information provided above is correct. In the case of medical emergency, I understand that every effort will be made to contact the emergency contacts listed above. In the event those persons cannot be reached or time does not permit, I hereby give permission to a licensed physician <i>or other licensed medical provider</i>, to provide proper treatment, including but not limited to hospitalization, injection, anesthesia and/or surgery, for the above-named Key Leader participant. On behalf of myself and my ward/minor, I/we hereby RELEASE, WAIVE AND FOREVER DISCHARGE Kiwanis International and its officers, directors, employees, parents and subsidiaries, agents, from any and all claims, liabilities, causes of actions, damages, demands, judgments, executions, liens and costs whatsoever, in law or equity, including, without limitation, liability for death or bodily injuries to any person or damage to any property resulting from any (i) claims made against medical providers of emergency services under this authorization, or (ii) against Kiwanis International for obtaining medical emergency services for said Key Leader participant pursuant to this authorization. Parent or guardian _____ Signature _____ Date _____ (Required if under the age of 18)																									

Community Values Agreement

Key Leader participants, adult advisors and invited guests are expected to demonstrate behavior consistent with the high ideals of the Key Leader program and should abide by the provisions of this agreement while in attendance at any Key Leader event. Every member will respect the authority of the Key Leader district chairs and site coordinators, as well as the Kiwanis International designated staff.

Responsible Behavior

1. Participants may not possess or consume any alcoholic beverages.
2. Participants may not possess or use any drugs or other controlled substances, with the exception of medication prescribed for the attendee.
3. Participants may not possess or use tobacco products.
4. Participants are expected to abstain from any activity of a sexual nature.
5. Participants may not possess weapons, firecrackers, or anything of a dangerous nature or act in any way unbecoming of a Key Leader.

Lodging

1. Participants staying in a camp or conference center must sleep in their assigned room or cabin.
2. Female participants are not allowed in the room of any male participant, and male participants are not allowed in the room of any female participant.
3. Male and female participants may be present together in cabin lounges when an adult chaperone is present.
4. All participants are expected to abide by a curfew from 12:00 a.m. and lasting until 6:00 a.m. unless otherwise specified by the camp or conference center.

Dress Code

1. All participants are expected to wear "camp casual" clothing. This includes shorts, t-shirts, jeans, sweatshirts, and closed-toe shoes.
2. At no time will any clothing with inappropriate language or graphics be allowed. Any shirts, shorts, or skirts deemed to be of inappropriate length will not be allowed.
3. All participants are required to wear name badges for all weekend events.

Enforcement

1. Violations of this agreement will result in notification to the respective nominator and sponsor.
2. Violations involving destruction of property, or possession, consumption or use of alcoholic beverages or controlled substances may result in dismissal of the attendee from the event, at the sole discretion of Key Leader advisors.
3. Notification, in writing, will be made by the Key Leader International staff or his or her representative, to the participant's high school, and to the parents of any member disciplined under this section.
4. The Key Leader program has been designed as a complete educational experience from 4 pm on Friday afternoon through 11:30 am on Sunday morning. All participants are expected to attend the full experience and these values will be in effect during this whole time.

Key Leader Participant Name (please print) _____

Key Leader Participant Signature _____

Date

Key Leader Parent/Guardian Signature _____
(Required if under the age of 18)

Date

By signing this document, I acknowledge that I am aware that photos may be taken of me during the event weekend and consent to the use of any such photos in magazines, social media, or other marketing and promotional materials.

Kiwanis

Photograph Release Consent Form

I hereby give Kiwanis International, its employees, and those acting with its authorization the right and permission to copyright, use, and/or publish photographic pictures or portraits of me in K-Kids and Builders Club promotional materials, which include video, catalogs, magazines, brochures, and the Kiwanis Internet Web site.

I hereby waive any right to inspect or approve the finished video, photograph, advertising copy, or printed matter that may be used in conjunction therewith or to the eventual use that might be applied.

I hereby release, discharge, and agree to hold harmless Kiwanis International, its employees, or vendors (including any firm publishing and/or distributing the finished product) from and against any liability as a result of any distortion, blurring, or alteration that may occur in the taking, processing, or reproduction of the finished product, even should the same subject me to ridicule, scandal, or indignity.

I hereby warrant that I am competent to contract in my own name insofar as the above is concerned. A parent or guardian must sign the release if the individual photographed is under 18 years of age.

I have read the foregoing release, authorization, and agreement before affixing my signature below, and warrant that I fully understand the contents thereof.

Name _____

Address _____

City _____ State/Province _____ Postal Code _____

Phone _____

Signature _____ Date _____

Parent/Guardian Signature: _____
(If subject is under 18 years of age.)

Witness _____



**Calvin Crest Conferences ("Calvin Crest")
PHOTOGRAPH, RECORDING, MEDIA CONSENT ("Photo Release")**

PLEASE READ CAREFULLY. BY SIGNING BELOW, YOU ARE AGREEING ON BEHALF OF THE MINOR (IF APPLICABLE) AND ON YOUR OWN BEHALF TO RELEASE CALVIN CREST AND OTHER PARTIES RELATED TO IT FROM LIABILITY.

IN CONSIDERATION of the privilege of my and/or the Minor's (defined later) use of Calvin Crest's facilities and participation in Calvin Crest's programs, the undersigned individual states as follows:

MINOR DEFINED: For purposes of this Photo Release, "Minor" is defined as a minor child in the broadest possible sense over which the Adult signing this Release has legal authority and responsibility. This may include but is not limited to, the adult's child by natural-birth, child by legal adoption, child by foster care, child by marriage (step-child), legal ward, juvenile, conservatee, and/or any other relationship whereby an adult accepts legal responsibility for a minor. By signing this Release on behalf of a Minor, I hereby represent I have legal authority to sign on behalf of the Minor identified herein.

PHOTO AND RECORDING ACKNOWLEDGEMENT: I acknowledge that Calvin Crest may take photographs or film or digital recording of me, the Minor, and other participants during Program activities, and I hereby authorize Calvin Crest and its agents to take, use, display, publish, reproduce, and distribute any and all photographs and recordings that include my and/or the Minor's image and to create derivative works based upon all such photographs and recordings, including use in media releases, reports on the findings of the Program, marketing and promotional materials, newsletters, and websites, social media, and electronic communications.

MISCELLANEOUS: If any provision of this document is determined to be invalid for any reason, such invalidity shall not affect the validity of any of the other provisions, which other provisions shall remain in full force and effect as if this document had been executed with the invalid provision eliminated, and such invalid provision may be modified by a judicial tribunal (including an arbitrator) to make such provision enforceable consistent with the parties' intent in entering into this document. I understand and agree that this document is intended to be as broad and inclusive as permitted under applicable law, and that this document provides the broadest release and waiver of claims as permitted under applicable law.

BY SIGNING BELOW, EACH UNDERSIGNED ADULT PARTICIPANT AND/OR PARENT/GUARDIAN OF THE MINOR PARTICIPANT ATTESTS AS FOLLOWS: I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND HAVE SIGNED IT FREELY AND VOLUNTARILY;

I HAVE LEGAL RESPONSIBILITY OVER THE MINOR PARTICIPANT, AND, IF I AM THE SOLE PARENT/GUARDIAN SIGNING BELOW, MY SIGNATURE IS SUFFICIENT TO ENTER INTO THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK FOR AND ON BEHALF OF THE MINOR; AND I HAVE HAD THE OPPORTUNITY TO REVIEW THIS DOCUMENT WITH LEGAL COUNSEL, IF I WISH, BEFORE SIGNING BELOW.

Print Participant's Name

Age

Participant's Signature
(Parent/Guardian Signature if Participant is under 18 years old)

Date



Calvin Crest Conferences ("Calvin Crest")

RELEASE OF LIABILITY AND ASSUMPTION OF RISK ("Release")

PLEASE READ CAREFULLY. BY SIGNING BELOW, YOU ARE AGREEING ON YOUR OWN BEHALF TO RELEASE CALVIN CREST AND OTHER PARTIES RELATED TO IT FROM LIABILITY.

IN CONSIDERATION of the privilege of my use and/or the Minor's (defined later) of Calvin Crest's facilities and participation in Calvin Crest's programs, the undersigned individual states as follows:

MINOR DEFINED: For purposes of this Release, "Minor" is defined as a minor child in the broadest possible sense over which the Adult signing this Release has legal authority and responsibility. This may include but is not limited to, the adult's child by natural-birth, child by legal adoption, child by foster care, child by marriage (step-child), legal ward, juvenile, conservatee, and/or any other relationship whereby an adult accepts legal responsibility for a minor. By signing this Release on behalf of a Minor, I hereby represent I have legal authority to sign on behalf of the Minor identified herein.

ASSUMPTION OF RISK: Calvin Crest intends to make me aware, and I understand, that use of Calvin Crest's facilities and participation in Calvin Crest's programs, including, but not limited to, swimming in pools, ponds and lakes; boating, kayaking, paddleboarding; high ropes courses, zip lines, giant swings, and rappelling; biking; archery and archery tag; use of swings and playground equipment; use of the disc golf course; skating; snowboarding; snow tubing; strenuous competition games and physical activity in natural environments; free-time activities of choice (ball games, horseshoes, etc); table games; mountain and wilderness travel; transportation to and from Calvin Crest and to and from camp trips/activities; crafts; rock scrambling, technical rock climbing & climbing wall; golf cart usage (the "Program"), exposes the participant to certain risks, hazards, and dangers, including, by way of example, the risk of personal injury (**including** the risk of permanent disability or death), accidents or illnesses in remote places (without the immediate availability of medical facilities); vehicle accidents; exposure to adverse weather conditions and wildlife; exposure to biting insects and wildlife, including insects and wildlife that may carry disease; malfunctioning equipment such as helmets, life jackets, harnesses, ropes, cables and any equipment provided by Calvin Crest related to any of the above-described activities; malfunctioning camp facilities; slippery and/or uneven surfaces; open, natural water conditions with varying depths and currents; and exposure to infectious sicknesses and diseases, epidemics and pandemics, including COVID-19 (collectively, the "Inherent Risks"). **There may be other risks, which may not be known by me, or predicted and controlled by the Program, and which could result not only in physical, mental, or emotional injury but in social, economic, or other kinds of losses either not known to me or not foreseeable at this time and I acknowledge these are included within the Inherent Risks.** The Inherent Risks may be caused by my own actions or inactions, the actions of others, the conditions in which the Program takes place, or the negligence of the "Released Parties" named below. I also understand that outdoor, recreational and adventure activities require physical exertion, and any participant should be in good physical health. I further understand it is my responsibility to provide adequate clothing for myself to participate. If I am not in good health, I realize this may create additional risk. **I FULLY AND VOLUNTARILY ACCEPT AND ASSUME ALL SUCH INHERENT RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES** incurred by me and/or the Minor as a result of participation in the Program.

RELEASE - ADULT AND/OR PARENTS'/GUARDIANS' RIGHTS:

I HEREBY RELEASE, DISCHARGE, AND AGREE NOT TO SUE the Released Parties, and each of them, and do discharge and waive, any and all claims, demands, losses, damages, and liabilities that I and/or the Minor as a participant may have or sustain, including attorneys' fees and costs, with respect to any and all property damage, economic loss, medical expense, personal injury, and other expense, injury, or

harm, and/or death arising directly or indirectly from participation in the Program, including without limitation any and all of those Inherent Risks described above. The foregoing sentence shall apply (without limitation) to all claims, demands, losses, damages, and liabilities, **including but not limited to claims for negligence**, loss of consortium and wrongful death, but excepting claims related to gross negligence, intentional and/or willful acts of misconduct.

APPLICATION OF COVENANTS AND UNDERSTANDINGS: The covenants and undertakings of this Release are given for and shall be binding upon my family, heirs, estate, next of kin, executors, administrators, legal representatives, beneficiaries, successors, and assigns.

INDEMNIFICATION: I FURTHER AGREE TO INDEMNIFY, SAVE AND HOLD HARMLESS the Released Parties, and each of them, from and against any and all claims, demands, losses, damages, attorneys' fees and costs, expenses, and liabilities made against or incurred by any of them, including those for indemnity, contribution, or otherwise, arising from my and/or the Minor's participation in the Program and the Inherent Risks, whether resulting from claims, actions, or lawsuits asserted by me or by another person against the Released Parties, except to the extent prohibited by applicable law.

MISCELLANEOUS: If any provision of this document is determined to be invalid for any reason, such invalidity shall not affect the validity of any of the other provisions, which other provisions shall remain in full force and effect as if this document had been executed with the invalid provision eliminated, and such invalid provision may be modified by a judicial tribunal (including an arbitrator) to make such provision enforceable consistent with the parties' intent in entering into this document. I understand and agree that this document is intended to be as broad and inclusive as permitted under applicable law, and that this document provides the broadest release and waiver of claims as permitted under applicable law.

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Print Participant's Name

Age

Participant's Signature
(Parent/Guardian Signature if Participant is under 18 years old)

Date

Central Valley Key Leader Packing List

The Stuff You need for Key Leader Weekend!

<u>Clothing:</u> It will be cold; with periods of warmth. Pack comfortable layers: tee, sweatshirt, jacket, coat	<u>Toiletries:</u> Because hygiene matters.
☐ 3 changes of clothes (2 days + a spare dry set)	☐ Shampoo, conditioner, body wash, face wash
☐ 3 sets of socks and underthings	☐ Towel & washcloth
☐ 2 sweatshirts	☐ Toothpaste, toothbrush and floss
☐ 1 light jacket	☐ Deodorant
☐ 1 warm water resistant coat (it may rain or snow)	☐ Hairbrush and styling products
☐ Pajamas (you will have roommates)	☐ Any other items you use daily, for example:
☐ Hiking boots, or tennis shoes (not slip ons)	☐ -dry shampoo
☐ Shower shoes or flip flops	☐ -cleansing wipes
	☐ -cosmetics
	☐ -jewelry (no valuables)
<u>Bedding:</u> Expect cold nights.	<u>Other Stuff:</u>
☐ Sleeping bag (preferred over blankets and sheets)	☐ Signed forms
☐ Extra blanket	☐ Medications (list on the form & keep them with you)
☐ Pillow	☐ Warm gloves
	☐ Umbrella
	☐ Flashlight
	☐ Water bottle
	☐ Hot Cocoa Mug (show your style)
	☐ Camera or cell phone and charger
	☐ Pen and Pencil
<u>Leave Valuables at Home</u> Camp is not responsible for your lost items.	