

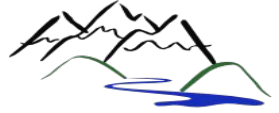
# CTF Camp 2018 Adult Packet

- What** CTF Camp 2018!!!
- Where** Golden Bell Camp and Conference Center  
380 County Road 512  
Divide, CO 80814  
Phone: 719.687.9561  
Email: [info@goldenbellrocks.com](mailto:info@goldenbellrocks.com) Website: <https://www.goldenbellccc.org/>
- When** July 22nd - July 27th  
Meet at the Northeast Church building in Garland (318 N. Shiloh Rd. Garland, 75042) at 3:30 am. We will be pulling out of the parking lot at 4 am. No exceptions!  
We are estimating we will arrive at the camp by 7:30 PM CST / 6:30 PM MST.
- Who** 7th - 12th grade students from the CTF ministries and their friends! This includes 6th graders moving into 7th grade, and 12th graders who just graduated.
- Cost** **\$350** per adult camper  
**Full Payments are due by June 27**  
\*\*Let us know if cost is prohibitive. You can pay cash or check to Christian Teen Fellowship, or online at [christianteenfellowship.com/shop](http://christianteenfellowship.com/shop).
- What to Bring**
- Bible  Notebook  Pillow
  - Sleeping bag or sheets for twin bed  Flashlight
  - Electrical Appliances (Hair dryer, fan, etc.)
  - Toiletries (Soap, shampoo, toothpaste, toothbrush)
  - Clothes (for warm and cool climates)
  - Towel  Snacks  Sun screen  Hat  Poncho/Rain Jacket
  - Extra Cash for meals on the way up to camp and back  
(3 on the way there, 2 on the way back)
- What We Need From You!**
- Online Registration Form (<https://christianteenfellowship.com/camp/>)
  - Golden Bell Waiver
  - Child Abuse Reporting Form
  - Payment (cash or check to Christian Teen Fellowship, or online at [christianteenfellowship.com/shop](http://christianteenfellowship.com/shop))

We are SO thankful for your willingness and desire to serve our teens this year at CTF Camp! We absolutely could not do what we do without adults like you. We depend heavily on your involvement in order to impact these teens lives in a powerful way. Please be in prayer for this week. We are so excited to see all that God does in and through you!

Please fill out and return ALL forms to Brianna or Tyler Marble with your payment AS SOON AS POSSIBLE. The deadline for the forms and payment is **June 27th**.

\*\*If you want a printed copy, contact us and we will provide one for you.



**WAIVER, RELEASE AND INDEMNIFICATION AGREEMENT**

I wish to participate in recreational activities to be made available to participants at Golden Bell Camp including activities that may be hazardous or otherwise involve a risk of physical injury or death to the participants (the "Activities").

I expressly assume any and all risks of injury or death arising from or relating to the Activities including horseback riding, agricultural recreation and waive and release any and all actions, claims, suits or demands of any kind or nature whatsoever against Golden Bell Camp, its corporate affiliates, contractors, vendors, officer, agents, sponsors, volunteers or representatives of any kind (collectively "Releases") arising from or relating in any way to my voluntary participation in these activities. I understand that this Waiver, Release and Indemnification agreement means, among other things, that if I am injured or die as a result of my participation in these activities, I, and/or my family or heirs cannot under any circumstances sue Releases or any of them for damages relating to or caused by my injuries or death.

**WARNING: UNDER COLORADO LAW, AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES PURSUANT TO SECTION 13-21-119 AND AGRICULTURAL RECREATION 13-21-121 COLORADO REVISED STATUTES.**

I agree to indemnify Releases or any of them, and their subrogees, if any, in the event of any loss, damage or claim arising from or relating in any way to my participation in any of the Activities.

I also hereby grant permission to Golden Bell Camp the right to use, reproduce, and/or distribute photographs, films, video-tapes, and sound recordings of me, without compensation or approval rights, for use in materials created for purposes of promoting the activities of Golden Bell Camp.

I give permission for my child to participate in all on or off site camp activities, including transportation, except as noted, to be provided routine health care, and to be given medication authorized by my child's health care provider or the licensed medical provider selected by the camp. I give permission to the physician selected by the camp to order x-rays, routine tests, and treatment for the health of my child. If I cannot be reached in an emergency, I give permission to the physician to hospitalize, secure proper treatment for, and order injection, anesthesia, or surgery for my child.

Golden Bell Camp and Conference Center is not responsible for lost, stolen or damaged items. Any item found will be kept for no more than two weeks. Golden Bell cannot be responsible for returning items.

I have read this Waiver, Release and Indemnification Agreement, have asked and received answers to any questions I had concerning its meaning and execute it freely, without duress, and in full complete understanding of its legal effect, and of the fact that it may affect my legal rights.

_____	_____	_____	_____
Date	Signature	Print Name	Group Name (if Applicable)
_____	_____	_____	_____
Date	Signature	Print Name	Group Name (if Applicable)
_____	_____	_____	_____
Date	Signature	Print Name	Group Name (if Applicable)

**FOR PARTICIPANTS UNDER THE AGE OF 18**

I am the parent or legal guardian of the child whose name and signature appear above. I have read and understand this Waiver, Release and Indemnification Agreement, and consent on behalf of the Participant to its terms.

_____	_____	_____	_____
Date	Signature	Print Name	Group Name (if Applicable)

# Child Abuse Reporting

Under the “Child Protection Act of 1987” (C.R.S. 19-3-301) in the Colorado Children’s Code, child care center workers are required to report suspected child abuse or neglect. The law at 19-3-304 states that if a child care worker has “reasonable cause to know or suspect that a child has been subjected to circumstances or conditions which would reasonably result in abuse or neglect shall immediately report or cause a report to be made of such fact to the county department or local law enforcement agency.”

“Abuse” or “Neglect” means an act or omission in one of the following categories which threatens the health or welfare of a child: skin bruising, bleeding, tissue swelling, or death; any case in which a child is subjected to sexual assault or molestation, sexual exploitation, or prostitution; any case in which a child is in need of services because the child’s parents, legal guardian, or custodian fails to take the same actions to provide adequate food, clothing, shelter, medical care, or supervision that a prudent parent would take.

If at any time a staff member reasonably suspects child abuse, it is the responsibility of the staff member to report or to cause a report to be made of this suspicion to the local county department of social or human services at 719-687-3335 or the sheriff department. It is not staff’s role to investigate suspected abuse – only to report it. Persons who make a good faith report are immune from civil and criminal liability. Additionally, the law provides for the protection of the identity of the reporting party.

A child care worker who fails to report suspected child abuse or neglect commits a class 3 misdemeanor and will be punished as provided in section 18-1-106, C.R.S. The staff person could also be liable for damages “proximately caused thereby.”

I have read and understand the above requirements concerning my responsibility regarding child abuse reporting.

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Signature

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Date