



AZNYI WINTER CAMP 2024

Winter Camp 2024 is fast approaching! We are so excited to see God move once again in the lives of our students here on the Arizona District!

What is AZNYI Winter Camp?

Every year, our Arizona District NYI puts together camps for students all across Arizona and Southern Nevada. At these camps, we explore what it means to be followers of Christ, and how being His follower looks in our daily lives. In addition to this, we have an incredible amount of fun. Every year, without fail, we witness the powerful movement of the Holy Spirit move in the lives of the students involved.

What to Expect:

Camp is a time of community, activity, and worship. There will be a good amount of time spent playing games together, participating in various activities, and building relationships with one another. Expect to make new friends, mentors, and family. There will also be times of building our relationship with God, through worship experiences, breakout sessions, devotionals, and small groups. We encourage our attendees to come to camp open minded to what God may have for them. Expect God to speak into your life throughout the week, and be ready and receptive to what he has for you.

Important Times:

Camp Begins Friday, February 16 @ 6:30 pm - Registration & Pizza

Camp Ends Sunday, February 19 @ 12:00 pm - Head home

Cost: \$130 (Includes Winter Retreat Hoodie)

Recommended Packing List:

What to Bring

- 2 Days worth of warm clothes (Bring a backup just in case)
- Active or Hiking Shoes
- Comfortable Shoes
- An extra Hoodie or Jacket
- Toiletries:
 - Toothbrush, tooth paste, deodorant, shampoo, body wash
- Towel
- Sleeping Bag/Bedding & Pillow
- Bible & Notepad/Journal
- Reusable Water Bottle / Hydro Flask
- Optional: Spending Money

What to Leave at Home:

- Knives, Firearms or other Weapons
- Any drug paraphernalia (Including e-cigs or vape)
- Inappropriate clothing: Anything that has foul language or poorly represents Christ
- Distractions: Anything that will keep you from fully benefiting from the life change that God has for you this week

Release Forms

Below you will find our *Release Forms*. Please read them carefully then the parent or legal guardian must initial and sign in the proper places and have it Notarized by a certified Notary. Each student must have a Notarized Release form to participate in camp.

WINTER CAMP- Together 2024

Our theme for retreat this year is "Together"! Join us for a life-changing weekend at Emmanuel Pines Camp in Prescott, AZ!

AZNYI Medical/Liability Release Form

Name: _____

Grade Completed: _____ Age: _____ Birth date: _____

Medical Insurance Company: _____

Group Policy #: _____

Claim Office Address: _____

Claim Office Telephone: _____

Name of Parent/Guardian: _____

Address where parent can be reached during camp: _____

Phone number where parent can be reached during camp: _____

List any medical problems, conditions, allergies, medications you are presently taking, and any reactions to medications: _____

Physician's Name: _____ Phone Number: _____

Physician's Address: _____

PLEASE INITIAL ON EACH LINE:

_____ **Authorization For Consent** I hereby certify that I have full legal authority to consent and authorize all matters addressed herein. Additionally, I acknowledge that this release form includes travel dates to and from the event with my sponsoring district/local Church of the Nazarene.

_____ **Authorization for Medical Treatment** In the event that I am incapacitated or unable to make a medical decision, I authorize and direct any adult Nazarene Youth International employee, volunteer representing the Church of the Nazarene, or adult leader from my child's sponsoring district/local church to make emergency medical decisions for my child. I, therefore hereby authorize that emergency medical and/or surgical care may be provided for my son/daughter at my expense. I also hereby release and discharge the Church of the Nazarene, Inc. and its affiliates, along with any other chaperoning adult employees or volunteers of Nazarene Youth International, its agents, employees, officers, directors, affiliates, successors, assigns and all others from any and all claims, demands, expenses, personal injury, wrongful death, causes of actions, lawsuits, damages and liabilities of every kind and nature, whether known or unknown, in law or equity,

that I or my child ever had or may have, arising from or in any way related to my child's participation in any activities associated in anyway with the AZNYI Camp event. I have full knowledge as to such activities, and I have full knowledge of the probable risks involved. Except for those limitations named in the health portion above, I certify that my child is healthy and fit to participate in all such activities.

_____ **Guaranty of Payment for Medical Treatment** If the student listed is not covered by any type of health insurance program, I hereby guarantee payment for any fees, expenses or costs related to any medical treatment I receive in connection with my participation in the AZNYI Camp event. I understand and acknowledge that further guarantees of payment to health care professionals and institutions which provide medical treatment may be required. I also acknowledge that neither Church of the Nazarene, Inc., Nazarene Youth International (NYI), nor my child's sponsoring district/local church is responsible for the cost of my child's medical treatment and I shall indemnify, defend and hold harmless Church of the Nazarene, Inc., Nazarene Youth International, their respective officers, directors, employees, and/or agents from and against any and all claims which may be made as a result of my failure to provide payment for any medical treatment.

_____ **Media Consent** Further, I acknowledge that NYI and/or its agents will be taking photographs and/or videos of the AZNYI Camp event and that my child may appear in these photographs and/or videos. I hereby give my permission to AZNYI Camp event, Arizona District Church of the Nazarene and/or Church of the Nazarene, Inc. to utilize event media in all forms and in all manners for marketing, promotional and future event development.

PARTICIPANT AGREEMENT, WAIVER AND RELEASE

Knowing there are dangers, hazards, and risks associated with Camp & Retreat Center's activities including Archery, Climbing Wall, Low Ropes, High Ropes, Zip Line, Paintball, Disc Golf, and/or related activities (hereafter "Activities"), and with sufficient knowledge of my experience, physical condition, and any and all limitations I may have at the time, I voluntarily assume all responsibility and risk of loss, damage, illness, injury and/or death that I may in any way sustain in connection with my voluntary participation in any and/or all of these Activities.

Understanding that I could be injured or die as a result of my participation in the Activities, I agree to release, indemnify and discharge Emmanuel Pines Camp & Retreat Center and AZNYI and their agents, owners, officers, volunteers, participants, employees, and all other persons or entities acting in any capacity on their behalf (collectively "Emmanuel Pines") and hold Emmanuel Pines & AZNYI harmless on behalf of myself, my children, my parents, my heirs, assignees, personal representative and estate.

It is my intent by signing this document to agree not to make a claim or bring a lawsuit against Emmanuel Pines and AZNYI and to forever release them from any and all legal responsibility for any loss, injury, damage (including death) that I may suffer as a result of my participation in the aforementioned Activities whether due to negligence, default, action or inaction on the part of Emmanuel Pines, with the exception of gross negligence on the part of Emmanuel Pines.

Upon signing this form, I acknowledge and agree that I must abide by all rules, regulations, expectations, and standards of conduct applicable to participation in the Activities. I understand that Emmanuel Pines reserves the right to limit or terminate my participation in any activity, in the sole discretion of Emmanuel Pines staff.

I also hereby grant Emmanuel Pines Camp & Retreat Center permission to use my likeness, which may appear randomly and without any intent to exploit me personally, in any photograph, video, or other digital media captured in the normal course of Emmanuel Pines memorialization of activities at the camp, in any and all of its publications, including web-based publications, without payment or other consideration given to me.

I CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THIS AGREEMENT, WAIVER AND RELEASE AND I SIGN IT VOLUNTARILY WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE.

CODE OF CONDUCT CONSENT I ACKNOWLEDGE THAT THE FOLLOWING APPLIES FOR MY CHILD:

_____ **The use/possession of any drugs, alcohol, tobacco, fireworks, pornography or any other illegal substances is strictly prohibited and if they are caught will result in immediate removal from the premises with possible legal action taken.**

_____ **AZNYI is not responsible for any lost, stolen or damaged property brought to camp by any child. Anything brought to camp is the responsibility of the camper to protect. AZNYI will not pay for any lost, stolen or damaged items.**

_____ **I give permission for any representative of AZNYI to search any and all of my child's property if deemed necessary by the camp directors.**

By signing below I acknowledge that I have read the foregoing Liability Release Waiver and understand its contents; that I am at least eighteen (18) years old and fully competent to give my consent; That I have been sufficiently informed of the risks involved and give my voluntary consent in signing it as my own free act and deed; that I give my voluntary consent in signing this Liability Release Waiver as my own free act and deed with full intention to be bound by the same, and free from any inducement or representation.

PLEASE SIGN BELOW:

Herein "Parent/Guardian" (PRINT) Herein "Minor" (PRINT)

Organization/Youth Minister/Youth Director/Sponsor Herein "Agent" (PRINT)

Parent/Guardian Signature

Signature Date