

MALLARD MANOR MINISTRIES  
RELEASE FORM (2 PAGES)

As the custodial parent/legal guardian of \_\_\_\_\_ (full name) permission is hereby granted for my child to participate in ALL activities directed by Mallard Manor and its affiliates. I understand/agree that my child will be participating in potentially dangerous activities or may be exposed to: shooting archery equipment, discharging of firearms, swimming, boating, sports activities, hunting & fishing, wild animals & reptiles, etc. I agree to hold harmless Mallard Manor and its affiliates and covenant not to sue in the event that my child incurs injury, sickness, or death from participating in any and all of Mallard Manor activities which may be potentially dangerous. I also give my permission for Mallard Manor to authorize any hospital/medical treatment deemed necessary by a qualified health care provider for my child in the event of an emergency. I understand that if such medical treatment becomes necessary that our family health insurance will be provided to the health care provider for payment. In the event that there is no insurance coverage, custodial parent or legal guardian will assume full responsibility for payment. I furthermore authorize Mallard Manor, in its discretion, to use, distribute, and publish any and all photographs, video tape recordings, and/or sound recordings from activities of my child on behalf of Mallard Manor. I understand that in the event that my child misbehaves or causes damage to Mallard Manor property that I will be required to pick up my child immediately at my own expense with no refund given and be required to pay for all damages.

Event Date Requested: 1<sup>st</sup> choice \_\_\_\_\_ 2<sup>nd</sup> choice \_\_\_\_\_

Requested Roommate (not guaranteed, see rooming policy below): \_\_\_\_\_

Has your child attended a camp or youth hunt with us before? Yes or No

\_\_\_\_\_  
Date of Birth Date of last Tetanus Booster T-Shirt Size

\_\_\_\_\_  
List any known allergies including any allergies to medicine (Continue on back of form if needed)

\_\_\_\_\_  
List any known health problems and/or activity restrictions (Continue on back of form if needed)

\_\_\_\_\_  
Name of Parent/Legal Guardian

\_\_\_\_\_  
Address City/State/Zip

\_\_\_\_\_  
Phone: Home Work Mobile Email Address (important)

\_\_\_\_\_  
Person responsible for medical charges (if different from above)

\_\_\_\_\_  
Address City/State/Zip

\_\_\_\_\_  
Phone: Home Work Mobile

\_\_\_\_\_  
Person to notify if Custodial Parent/Legal Guardian is unavailable

\_\_\_\_\_  
Phone: Home Work Mobile

\_\_\_\_\_  
Family Physician: Phone

\_\_\_\_\_  
Insurance Carrier & Policy Number

\_\_\_\_\_  
Signature of Custodial Parent/Legal Guardian Date

\_\_\_\_\_  
Signature of Witness Date

\_\_\_\_\_  
Child's Social Security Number (only needed if taking Hunter's Education Class for particular camps)

## Mallard Manor Ministries Important Information

**Reservation Policy:** In order for your child's name to be placed on a particular date for any of our programs, we must have a 50% deposit due immediately and release form.

For example: If we receive a call or email requesting a particular date, we will notify you ASAP whether or not it is available. If it is available, we will pencil your child's name in for the event for 3 days while we wait to receive your deposit check via mail. After the 3 days are up, your child's name will NOT be placed on the attendee list until a deposit is received in the office. If the date is already full by the time the deposit is received, then if any dates are still available, we will give you the next available date option. The final balance will be due 2 weeks prior to arrival. Our goal with our ministry programs is to maximize our impact on kids and we cannot do this when we turn away youth due to unknown cancellations. We believe that this will best serve our youth as we seek to keep offering this wonderful experience in the future.

**Cancellation Policy:** Mallard Manor Ministries requires parents to give a 2 week notice to cancel their event date. If a parent cancels less than 2 weeks prior to the event, all funds will be forfeited and the parent will have the option to find a replacement to go in their child's place instead. Otherwise, funds will be used by Mallard Manor to scholarship another child.

**Rooming Policy:** We often receive the request from parents for their child to room with a particular child attending our programs. We do strive to honor these requests, however, in some instances these requests may not be granted due to number of attendees that week, timeliness of reservation, and behavior. We believe that part of the program experience is for youth to branch out of their normal routine and form new friendships.

Please fill out the Release Form ASAP and send it to us with your deposit to:

Mallard Manor - 2741 CR 6, Drew, MS 38737.

### **NOTE:**

If your child will be attending a specific camp session that includes Hunter's Education Certification; the state of MS requires them to be at least 10 years of age, possess their social security number and valid mailing address in order to receive certification.  
(NOT ALL CAMPS INCLUDE HUNTER'S EDUCATION CERTIFICATION)

Summer Camp Check-In is from 5-6 p.m. on Sunday (meal at 6:30 p.m.)

Camp Commencement is from 12-12:30 p.m. on Wednesday

(Pick-up time for kids attending a camp that includes the optional Hunter's Ed. Certification given on the final day vs. specific camps taking the course during the week will be at 5 p.m. on Wednesday.)

DiscipleNOW Youth Hunt Check-In is from 6-7 p.m. on Friday (meal at 7 p.m.)

Commencement/Worship Service is from 12:30-1:00 p.m. on Sunday

Parents are invited to attend.

Check-Out time is 1:00 p.m.

**We kindly ask that parents refrain from dropping kids off early and promptly pick up their child on the final day of camp.**