

FLORIDA SHERIFFS BOYS RANCH
2021 Summer Day Camp
REGISTRATION

Mail completed forms to: P.O. Box 2000, Live Oak, FL 32064 ATTN: Joanne Thomas,
or e-mail to jthomas@youthranches.org. For questions or info call (386) 842-5501.

FOR OFFICE USE ONLY

Date Received: ___/___/2021

Amount Enclosed: \$ _____

Camper's Name: _____ Street: _____

Guardian(s): _____ City: _____ State: _____ Zip: _____

Relation to Camper: Mother Father Other: _____ Home Phone #: _____

Work/Emergency #: _____ Cell #: _____

Additional Emergency Contact #: _____ Relation to Camper: _____

M F Birthday: ___/___/___ T-Shirt Size: _____

E-mail address: _____ Are the parents or guardians serving as staff? Y N

COWBOY CAMPS (Equestrian)

Cost is \$200 and \$175 for siblings. Available space for
16 children ages 8–16.

FSBR Cowboy Camp – Week 1 | June 21–25

Deadline to apply is June 11th.

FSBR Cowboy Camp – Week 2 | July 26–30

Deadline to apply is July 16th.

Camps begin at 8:15 a.m. with drop-off at the Boys Ranch Arena, and ends with pick-up at 5:15 p.m. at the Boys Ranch gymnasium (Monday-Thursday). Camp concludes on Friday at the Boys Ranch Arena at 12:00 p.m. after the event showcase.

Lunch and snacks will be provided.

\$ _____ **enclosed.** \$25 deposit required with application. Deposit will be applied to the total cost of camp upon final payment, which must be received by the last day of registration.

MEDICAL INFORMATION:

Height: _____ Weight: _____ Hair: _____ Eyes: _____ Allergies: _____

Other: _____ Date of last Tetanus shot: ___/___/___

Insurance Co.: _____ Address: _____ Phone #: _____

NOTE

All medication must be checked in with nurse at registration, with original label and up-to-date. The nurse will administer the medications as labeled. Please make any additional comments for nurse, counselor or director's attention on the reverse of this form.

A physical must be submitted with youth's application. Physicals must be completed within one year prior to start of the camp session.

As the parent/guardian of _____, I hereby agree: **(Initial each paragraph)**

1. Not to hold Florida Sheriffs Youth Ranches, Inc., or staff responsible for illness or injury. _____
2. To give permission to participate in approved camp activities such as initiative problem solving, canoeing, hiking, team-building, team sports, archery, wood working, swimming, equestrian activities, off-campus trip to the springs and classroom setting activities (except as authorized by doctor's orders). _____
3. To give the Agency complete authority in regard to discipline matters, authority to make decisions regarding medical problems and plans for treatment. _____
4. To give the Agency permission to transport my child and release the Agency and private parties providing Camp transportation from all liability. _____
5. To give permission for the youth to be photographed and participate in public speaking activities. _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: ___/___/___

Florida Sheriffs Boys Ranch Horseback Riding Release

For COWBOY CAMPS (Equestrian) ONLY

In consideration of the acceptance of my minor child attending Cowboy Camp, it is understood and agreed that I/we are aware of the risks and exposures of personal injury involved through horsemanship activities, and hereby release The Florida Sheriffs Boys Ranch and the officers thereof, from all and every claim for damages which may occur to me at any time hereafter in favor of myself, heirs, representatives or dependents, against said officers, by reason of any injury, loss or damage which may be suffered by me or them or default whatsoever, and I hereby assume and accept the full risk and danger of any hurt, injury, or damage which may occur through or by reason of any matter, thing, condition, negligence or default, and/or any person or persons whatsoever, in the exhibitions, sports contest, and parades, or any of them, held or given by or under the direction of said Florida Sheriffs Boys Ranch.

WARNING – Under Florida law, an equine activity sponsor or equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risk of equine activities.

With my signature, I agree that my participating minor child attending the Cowboy Camp will follow the rules of the Florida Sheriffs Boys Ranch Cowboy Camp and I hereby execute this release.

Parent/Guardian signature: _____ Date _____

Print name of minor child: _____ Date _____

FLORIDA SHERIFFS YOUTH RANCHES, INC.
NOTICE OF PRIVACY RIGHTS FOR YOUTH

This notice describes how health information about you may be used and disclosed, and how you can get access to your protected health information. The Florida Sheriffs Youth Ranches is dedicated to maintaining the privacy of your Protected Health Information (PHI). In conducting our business, we will create records regarding our youth and the treatment and services we provide to you.

We are required by law to maintain the confidentiality of protected health information. We also are required by law to provide you with this notice of our legal duties and the privacy practices that we maintain in our agency concerning your PHI. By federal and state law, we must follow the terms of the notice of privacy practices that we have in effect at the time.

We may use and disclose your PHI in the following ways: treatment, payment, health care operations, release of information to family/friends, disclosures required by law, public health risks, health oversight activities, lawsuits and other similar proceedings, law enforcement, research, serious threats to health or safety, military, and national security. You have the right to confidential communication, requesting restrictions, inspection and copies, amendment, accounting of disclosures, right to paper copy of this notice, right to file a complaint, and the right to provide an authorization for other uses and disclosures.

For a more detailed description of the Notice of Privacy Rights for Youth, please contact our HIPAA Compliance Officer. If you have any questions in regards to the Notice of Privacy Rights for Youth, you may contact the Privacy Officer at the Florida Sheriffs Youth Ranches, P.O. Box 2000, Boys Ranch, FL 32064, 386-842-5501.

AGREED BY _____ DATE _____
(Signature of Parent/Legal Guardian)

STATE OF FLORIDA, COUNTY OF _____

Before me personally appeared the said _____,
who states that he/she executed the above instrument of his/her own will and accord, with full knowledge
of the purpose thereof.

Sworn to and subscribed before me this

Notary Seal

_____ day of _____, 20_____

(Signature of Notary Public, State of Florida)

Print/Type or Stamp Commissioned Name of Notary Public

Personally know _____ or Produced Identification _____

Type of Identification Produced: _____

FLORIDA SHERIFFS BOYS RANCH

COWBOY CAMP

PHOTO RELEASE

This release permits my youth to be photographed or recorded for use in any of the media of mass communications, for the purpose of Florida Sheriffs Youth Ranches publicity. The Youth Ranches, being mindful of client confidentiality issues, will carefully select and include the children and families we serve, in various forms of photography, print and other media. Every effort will be made to incorporate a positive, self-esteem-building theme without revealing the full identity of the individuals involved.

With my signature, I agree that my participating minor child attending the Cowboy Camp can have their photograph used and acknowledge that I have read this Release in its entirety.

Parent/Guardian Signature: _____ Date _____

Print name of minor child: _____