

God calls you by name...

Ponderosa Retreat Center

Nov. 13th at 7:00pm – Nov. 15th 11:30am

15235 Furrow Road
Larkspur, CO 80118-5703
Transportation is on your own

To Bring:

- Bible/prayer book
- A Change of Clothes**
- Sleeping Bag/PJ's/Pillow
- Snack to Share***
- Personal care items/towel
- Reusable Water bottle

Not to Bring::

- Cell phones****
- Tobacco Products
- Drugs/Alcohol (Duh!)
- Negative Attitude

****You will receive a shirt to wear for Saturday.**

*****Dinner is NOT provided on Friday Evening**

******Cell phones will be taken for the entire weekend if seen**

PERMISSION SLIP

I hereby give permission for my child/children, _____ to participate in the activity described below:

Title of Activity: Confirmation Retreat

Description of Activity: "Called by Name"

Supervisor of Activity: Angelle Schott

Date and Time of Activity: Nov. 13th @ 7:00 pm to Nov. 15th @ 11:30 am - No Dinner served on Friday

Method of Transportation: Is on your own

Tee-shirt size (circle one): S M L XL

Cost: \$140

My child or children has/have no medical or physical limitations which might limit his/her or their participation in the activity other than those which I have described on the page which I have attached to this Permission Slip. As a parent or guardian, I agree that I shall be fully responsible for any injury, harm, or property damage caused by my child to children during the activity. Should my child or children misbehave during the activity, I hereby give permission for the Supervisor of the Activity or his or her designee to direct my child to stop misbehaving, to take "time out," or be returned home by appropriate means, at my expense.

Date

Signature

Printed Name

Address (include state/zip code)

Emergency Phone Numbers

Please return form by: **November 1, 2020**

This form must be retained on file for three (3) years from signed date

ACTIVITY RELEASE

For those 18 years of age or older, all parents, and all guardians:

I consent for any of my children listed below to participate in any activity or trip sponsored by the Diocese of Colorado Springs or its affiliates* (collectively, "the Diocese"). In the case of medical need, I authorize the Diocese to arrange for medical or dental services for me and any of my children listed below. I agree that any such expense will be my obligation.

I, individually, and in my capacities as parent, guardian, or next friend of my children:

_____ waive, release, and indemnify the Diocese and its agents, directors, officers, employees, and volunteers (collectively, the "Released Parties") from all claims or liability which have arisen or may arise from any Diocesan activity or trip and which involves any damage, loss, or injury to me, my spouse, any of my children, my property, or the property of any of my children. In the same capacities, I promise not to sue any of the Released Parties for any such claims or liability. This waiver, release, indemnification, and promise not to sue does not apply to claims of criminal conduct or gross negligence.

This Activity Release is revocable prospectively only by a writing signed by me which bears the date that the revocation is delivered to the Diocese.

Date Signature

Date Signature

Home phone: _____ Work phone: _____ Mobile phone: _____

Medical Insurance Company and Policy Number: _____

Authorized Medications: _____

Family Physician/Emergency Contact and Phone: _____

Special considerations or needs (allergies, asthma, etc.) _____

For all those over 14 and under 18 years of age:

I waive, release, and indemnify the Released Parties as identified above from all claims or liability which has arisen or which may arise from any Diocesan activity or trip and which involves any damage, loss, or injury to me or my property.

Date Signature

Date Signature

*"Affiliates" includes all Diocesan parishes, missions, schools, and ministries and also Catholic Charities of Colorado Springs, Inc., Partners in Housing, Inc., Ave Maria Catholic School Corporation, and the Catholic Foundation of the Diocese of Colorado Springs, Inc., Villa San Jose & Villa Santa Maria, Queen of Heaven Cemetery.

EMERGENCY CONTACTS:

Please note: Emergency Contacts are NOT parents.

Name _____ Relationship to student _____

City/State _____

Phones: Home _____ Cell _____

Name _____ Relationship to student _____

City/State _____

Phones: Home _____ Cell _____

In order to best serve your child in the classroom, we need to know of any medical conditions or special instructions, physical or psychological impairments (i.e. allergies, learning disabilities, etc.)

Name: _____ Concern: _____

Name: _____ Concern: _____

Name: _____ Concern: _____

COVID-19 SCREENING QUESTIONNAIRE

Ponderosa Retreat & Conference Center

Parents are to complete this for each camper 7 to 14 days prior to camp and again on the day of boarding transportation to come to camp.

DATE: _____

Temperature: _____

Name of Camper: _____

Name & Dates of Camp Attending: _____

In the past 14 days, answer Y or N if camper has demonstrated any of the following:

Y or N FEVER (100.4F or 38C or higher)

Y or N COUGH

Y or N SHORTNESS OF BREATH

Y or N FATIGUE

Y or N HEADACHE

Y or N SORE THROAT

Y or N MUSCLE ACHES

Y or N LOSS OF TASTE OR SMELL

Y or N NAUSEA, VOMITING, or DIARRHEA

Y or N *Been exposed to someone who was diagnosed, tested positive, or quarantined for COVID-19?*

Y or N *Traveled to an area with known local spread of COVID-19?*

If YES was circled above or you need to share more specifics, please list details below:

I attest that the above information is accurate to the best of my knowledge.

Parent/Guardian Signature

Date

PONDEROSA RETREAT & CONFERENCE CENTER
COVID-19 WAIVER

ASSUMPTION OF RISK

I, _____ (referred to as "Guest"), expressly understand and agree that use of PONDEROSA's facilities and premises present known and inherent risks regarding any potential and/or actual infection of Covid-19 and/or any related illness, the result of which may be both serious and minor, including but not limited to, cough, fever, pneumonia, hospitalization, and death. Guest is responsible for evaluating the risks that he/she/family members may face. Guest has done so, and by signature below and engaging in PONDEROSA activity, in exchange for the opportunity to voluntarily participate in CAMPING and PONDEROSA activities, has assumed the risks and is responsible for his/her/family member's actions. Guest further recognizes, understands, and agrees that PONDEROSA assumes no responsibility for any liability, damage, or injury relating to or resulting from Covid-19 that may be caused by the negligent, grossly negligent, or willful acts or omissions committed prior to, during, or after use of PONDEROSA's facilities and premises by Guest.

ACKNOWLEDGMENT OF SAFETY MEASURES TO BE UTILIZED BY GUEST AND CAMP

PONDEROSA hereby acknowledges that it will seek to take certain safety measures to help prevent, as best it reasonably can, infection or spread of Covid-19. Such safety measures include the following: cleaning and disinfecting publicly used spaces, wearing gloves when cleaning and disinfecting, maintaining social distancing from Guests, its employees, visitors, and guests, and wearing face masks when in the company of Guests. PONDEROSA will also stay apprised of any recommendations of the CDC and will consider action accordingly. Further, PONDEROSA may remove any safety measures listed herein once the CDC or the United States, Colorado, or local governments deem such measures are no longer necessary. Guest acknowledges that it will also take certain safety measures to help prevent, as best it reasonably can, infection or spread of Covid-19. Such safety measures include: ensuring that Guest does not have any symptoms of Covid-19 prior to entrance onto or use of PONDEROSA's facilities and premises, use of handwashing and hand sanitizer on a regular basis while on PONDEROSA's premises, maintaining social distancing, and proper use of facemasks when in the company of others. In the event that the CDC recommends additional safety measures, Guest agrees to pursue utilization of such safety measures upon verbal or written request of PONDEROSA.

INDEMNIFICATION AND HOLD HARMLESS

Guest specifically understands that it is personally responsible for its/family member's actions and omissions, and any resulting sicknesses or injuries relating to or resulting from Covid-19 and agrees to indemnify, defend, and hold harmless, including from reasonable attorneys' fees and/or any other associated costs, PONDEROSA, and its predecessors, successors, assigns, officers, directors, trustees, faculty, employees, volunteers, agents, and legal representatives, from any and all actions, claims, or demands that Guest, and assigns, have or may have for any and all sicknesses or injuries relating to or resulting from Covid-19, Guest may suffer or sustain, regardless of cause or fault, as a result of his/her voluntary decision to utilize the facilities and premises of PONDEROSA, caused by any act or omission of PONDEROSA and/or Guest, its employees, visitors, and guests resulting from utilizing the facilities and premises of PONDEROSA.

WAIVER OF CLAIMS

In consideration of being allowed to utilize PONDEROSA's facilities and premises, Guest (referred to herein as "Releasor"), hereby waives any and all claims, demands, damages, actions, or suits, in law or in equity, whether heretofore or hereafter accruing, or whether now known or not known to the parties, which may arise from any negligent or grossly negligent act or omission of PONDEROSA, or its predecessors, successors, assigns, officers, directors, trustees, faculty, employees, volunteers, agents, or legal representatives (collectively referred to herein as "Releasees"), including but not limited to claims for negligence, gross negligence, personal injury, and mental anguish, for or because of anything done or omitted, or suffered to be done, directly or indirectly related to Guest's use of and entrance upon PONDEROSA's facilities and premises relating to or resulting from possible or actual exposure to Covid-19. Releasor further waives any and all liability of Releasees for their negligence or gross negligence causing any accident, illness, injury, loss or damage to personal property, or any other consequences arising or resulting directly or indirectly from Guest's use of and entrance upon CAMP's facilities and premises. Releasor acknowledges and agrees that Releasees assume no responsibility for any liability, damage, or injury that may be caused by the negligent, grossly negligent, or willful acts or omissions committed prior to, during, or after Guest's use of and entrance upon PONDEROSA's facilities and premises. By signing this agreement Releasor is giving up legal rights.

By signing below, I am acknowledging the above and taking responsibility for EACH MEMBER in our camping party.

Guest Printed Name

Guest Signature

Date