

Buckeye District Wrenchin' & Racin' Fall camporee participant consent form

Participant first name

Participant last name

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Birth date

\_\_\_\_\_  
Unit

\_\_\_\_\_  
Address, city, state, zip code

Has approval to participate in the Buckeye District Wrenchin' & Racin' Fall camporee November 6-8, 2020

**INFORMED CONCENT, RELEASE AGREEMENT AND AUTHORIZATION**

I understand that participation in Scouting activities involves the risk of personal injury, including death, due to the physical, mental, and emotional challenges in the activities offered. Information about those activities may be obtained from the venue, activity coordinators or local Council. This activity will take place in an environment of automotive repair and of carpentry. Youth participants will be allowed use of tools and equipment approved for use by Scouts in the Guide to Safe Scouting, I also understand that participation in these activities is entirely voluntary and requires participants to follow instructions and abide by all applicable rules and the standards of conduct.

In case of emergency involving my child, I understand that efforts will be made to contact me. In the event I cannot be reached, permission is hereby given to the medical provider to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child. Medical providers are authorized to disclose protected health information to the adult in charge and/or any physician or health care provider involved in providing medical care to the participant. Protected health information/ confidential health information (PHI/CHI) under the standards for privacy of individual identifiable health information, 45 C.F.R 160.103, 160.501, etc. esq., as amended from time to time, includes examination, findings, tests results and treatment provided for purposes of medical evaluation of the participant, follow-up and communication with the participant's parents or guardian, and/or determination of the participant's ability to continue in the program activities.

**With appreciation of the dangers and risks associated with programs and activities including preparations for and transportation to and from activities, on my own behalf and/or on behalf of my child, I hereby fully and completely release and waive any and all claims for personal injury, death, or loss that may arise against the Boy Scouts of America, Simon Kenton Council, the activities coordinators, Robert Fann, Rob Fann Auto Repair LLC and all employees, volunteers, related parties, or other organizations associated with the Buckeye District Wrenchin' & Racin' Fall camporee.**

**NOTE: The Boy Scouts of America, Simon Kenton Council, Rob Fann Auto Repair LLC or volunteers associated with the Buckeye District Wrenchin' & Racin' Fall Camporee cannot continually monitor compliance of program participants or any limitations imposed upon them by parents or medical providers. List any restrictions imposed on a child participant in connection with program or activities below and counsel your child to comply with those restrictions.**

Restrictions, if any.    None

\_\_\_\_\_  
Participant's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
If minor, Parent/Guardian printed name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Area code and telephone number for best contact and emergency contact

**COVID-19 statement:** The Buckeye District Wrenchin' & Racin' event staff will abide by and enforce guidelines set forth by the State of Ohio and the Fairfield County Health Department with all event participants to mitigate the risk of COVID-19 spread. Mitigations include: Health screenings conducted by each unit prior to arrival at camp, health screening upon arrival at camp by event health and safety staff including a temperature check, regular hygiene reminders, hand washing stations throughout camp, additional cleaning and disinfecting of surfaces and shared program equipment. Face coverings are required inside all buildings and required outside when a social distance of six feet or greater cannot be maintained. While these best practices are in place there is still the chance COVID-19 could be spread. Every Scout and their family must evaluate their own unique circumstances to make an informed decision about attending the camporee. By signing the informed consent, release agreement and authorization the participant also acknowledges the COVID-19 statement