

New York State Right to Life | Camp Esther: August 4-6, 2023

Registration

Please complete and return the following four forms to NYSRTL, along with the registration fee **ASAP**. Please mail to Attn.: NYSRTL Camp Esther, NYSRTL, 41 State Street, M-102, Albany, NY, 12207, or email to alisons@nysrighttolife.org. Call 518-434-1293 or email with any questions.

Name _____

Address _____

City _____ State _____ Zip _____

Phone (_____) _____ Email _____

School _____ Grade/year _____

Age _____ Gender _____

Track option - choose one:

Basic track: This will be my first-time attending Camp Esther.

Advanced track: I have already attended Camp Esther one or more times.

T-shirt size - choose one: S _____ M _____ L _____ XL _____ XXL _____

***Registration Fee**

Thanks to our generous donors, registration is only \$200 per camper. This includes tuition, room, meals, snacks, materials and a 2023 Camp Esther T-shirt! Please include a \$200 check made payable to **New York State Right to Life Education Trust**. Mail to NYSRTL, 41 State Street, M-102, Albany, NY 12207, or call NYSRTL at 518.434.1293 with credit card to reserve your spot.

***Scholarships**

Partial and full Scholarships are available. Scholarship recipients must give a deposit of \$200 by credit card or check when registering. Checks or credit card info is destroyed after camp if all requirements are met. The camper must come on time, must not leave early, and must attend the full camp. If any of these requirements are not met, the scholarship is void, and \$200 will be accepted as payment or as a donation. There is a very limited number of spots at camp, and there is a limited amount of scholarship money; therefore, our donors know that they are at camp, and limited scholarship money. We want to fully educate our campers and respect our donors.

***Please note that camp payments are non-refundable after registration.** Space is very limited, and we do not want to turn someone away only to have a registered camper not attend. Also, we will be preparing and purchasing materials and food ahead of the long weekend, so your registration fee will be accepted as a donation to offset the expense. In the event you cannot attend, and you* are able to find someone to come in your place, or if we are able to find someone last minute, we will gladly make the switch. *If we do not know the new camper, we will require letters of recommendation from his/her pastor or priest and someone familiar with his/her pro-life beliefs.

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Release Form

For parents of campers younger than 18 years of age:

While I understand that New York State Right to Life will take reasonable steps to provide for the individual care and safety of my child, I am aware that NYSRTL and its employees or agents cannot assume any responsibility for any injury, damage, or harm which might result during the course of participation in any activity connected to Camp Esther.

In consideration of permitting my child to participate, I agree that such responsibility will remain with me, as the parent or guardian of my child. Should any claim be asserted by any person, as a result of the acts of my child while participation in the activity described above, or traveling to, from, or during Camp, or should my child or children assert any claim against NYSRTL or its employees or agents, I agree to indemnify and hold NYSRTL and its employees or agents harmless from any such claim, including attorney fees and costs incurred in defense thereof.

I further authorize medical treatment of my child or children, in the event of illness or injury sustained in my absence while my child or children participate in NYSRTL Camp Esther.

Parent's Signature _____

Parent's Name Printed _____

Date _____

Child's Name _____

For campers 18 years of age and older:

While I understand that New York State Right to Life will take reasonable steps to provide for my individual safety, I am aware that NYSRTL and its employees or agents cannot assume any responsibility for any injury, damage, or harm which might result during the course of participation in any activity connected to Camp Esther.

In consideration of my participation, I agree that such responsibility will remain with me. Should any claim be asserted by any person, as a result of my acts while participating in the activity described above, or traveling to, from, or during camp, or should I assert any claim against NYSRTL or its employees or agents, I agree to indemnify and hold NYSRTL and its employees or agents harmless from any such claim, including attorney fees and costs incurred in defense thereof.

Signature _____

Name Printed _____

Date _____

Medical Form

Camper Name _____

Medication Information _____

Unless otherwise notified, we will assume the camper is responsible for his or her own medications.

Allergies _____

If the camper has any known severe allergies, he or she should have an epi-pen or other lifesaving medication and know how to administer it.

Special Dietary Concerns _____

Parents' Emergency Contact Numbers (cell) _____

Emergency Contact - Other Than Parents

Name of Contact _____

Phone Number _____

Relation to Camper _____

Other Important Information

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Photo and Video Release Form

I grant to New York Right to Life Camp Esther, its representatives and staff the right to take photographs and video of me in connection with Camp Esther. I authorize them to copyright, use and publish these items in print and/or electronically.

I agree that they may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and internet content.

I have read and understand the above:

Camper's Signature _____

Camper's Name Printed _____

Date _____

Parent's Signature (if camper under age 18) _____