

SOUTHERN CALIFORNIA DeMOLAY LEADERSHIP CAMP
February 12-15, 2010
APPLICATION TO ATTEND CAMP - YOUTH

Space for the Camp program is limited and reservations will be accepted on a first received basis. All applications and fees are to be received at the DeMolay Office no later than **JANUARY 16, 2010**. To attend camp, the member must be at least 14 years old, have been a member for at least six months, and must have received both Degrees of the Order.

The fee to attend camp is \$50. Make checks payable to: SCJ DeMolay

Please Print

Name: _____
Last Name First Name

Address: _____
Street Apt.

City: _____ Zip: _____

Telephone: () _____

Chapter Name: _____ Current Officer Position: _____

Month and year initiated: _____. Age : _____

T-Shirt Size (Circle one): **S M L XL XXL XXXL 4XL**

I, the undersigned Parent or Legal Guardian, AND the undersigned DeMolay Applicant, do hereby agree that we will abide by the Statutes, rules, regulations, and edicts of the International Supreme Council, Order of DeMolay, by the Camp Rules, and the duly authorized Camp Advisors. We agree that if in the opinion of any Camp Staff Advisor the Camp attendee should be removed or asked to leave the Councilor Camp for a violation of the same. The Parent or Legal Guardian will immediately take the necessary action to cause the transportation of the violator from the Camp Site at the expense of the undersigned Parent or Legal Guardian.

We hereby agree to release and hold harmless the International Supreme Council, Order of DeMolay, the Grand Master of DeMolay International and its members together with the Executive Officer, staff members, and advisors of Southern California Jurisdiction, Order of DeMolay, from any and all claims or cause of action which the undersigned has or may have. This specifically includes any and all plans which arrive out of the attendance at the Southern California DeMolay Councilor Camp, including transportation to and from said Camp.

Signature of Parent/Legal Guardian Signature of DeMolay

 Signature Chairman or Chapter Dad

Mail to: **Southern California DeMolay**
303 West Lincoln Suite 200
Anaheim, CA 92805

Please fill out both sides of this form

For Office Use Only			
Date Received		Paid (Ck Number)	

MEDICAL RELEASE FORM

Southern California DeMolay Leadership Camp 2010

I, the undersigned as an adult or Parent/Legal Guardian of _____, do hereby give my consent and permission for him to participate in the Southern California DeMolay 2010 Councilor Leadership Camp, February 12 – 15, 2010.

In the event of any injury or illness to the above named minor, I hereby authorize any adult DeMolay Advisor in attendance to secure, and any physician in attendance to provide, such emergency medical treatment as shall be deemed necessary by those present; including but not limited to hospitalization, injections, anesthesia, surgery, x-ray, blood and medications. I understand that every reasonable effort shall be made to contact me prior to medical treatment.

The above named is subject to the following medical problems, and/or is receiving treatment under supervision of proper medical authorities as follows: (State on lines below. If none, state NONE.):

Neither DeMolay International nor the Jurisdiction of Southern California, Order of DeMolay, maintains any medical insurance for its members. I understand that I will be responsible for any and all costs of medical treatment incurred by or on behalf of _____. My family health insurance carrier and policy number are as follows:

Insurance Company Name	Policy Number	Policy Holder's Name
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In the event of an emergency and the undersigned parent or guardian cannot be reached, the undersigned parent or guardian hereby authorizes the following person to act on their behalf:

Name: _____ Phone: () _____

Address: _____ City: _____

Relationship: _____

Parent or Legal Guardian: Please print or type the following information about yourself:

Full name: _____ Relationship: _____

Address: _____ City: _____

Zip: _____ Day time Phone: () _____ Night: () _____

Signature of Adult, Parent or Guardian

Signature of DeMolay