



Camp Eva Indemnification Agreement

1. I, _____, hereby give permission for my child, _____, to attend Camp Eva on September 16, 2023. I understand that the camp's goal is to help facilitate the bereavement process for my child and to provide support for him/her in expressing feelings of grief.
2. I give permission for my child to be photographed or videotaped during Camp Eva under camp volunteer supervision. This material may be used for future publicity of Camp Eva including news media.
3. I give permission for my child to participate in arts and crafts projects that may be photographed or copied for future use by the Camp Director in fundraising, events, or mailings. Yes No

LIMITATIONS

Camp Eva provides bereavement education and teaches coping skills to grieving children. Camp Eva is considered a program that would complement and support licensed and professional counseling that is received elsewhere. Camp Eva does not provide counseling, psychological, psychiatric, or other health care services to the children who attend camp. Camp Eva has available a list of community resources for parents and guardians who are seeking additional services for grief.

Camp Eva serves bereaved children whose primary difficulty is working through grief-related problems and feelings, which may or may not be related to any psychological, psychiatric, or medical diagnosis of the children who apply to attend the camp. Camp Eva may not, therefore, be appropriate for all children. Accordingly, Camp Eva reserves the right to screen applicants to determine a child's readiness to participate in grief activities and interact with peers.

RELEASE

In consideration of the above-named child being granted permission to attend Camp Eva, I agree, for myself and on behalf of my child, to indemnify and hold harmless Camp Eva, and Youth Camp, Our Hospice of South Central Indiana, Inc., and the agents, volunteers, and employees of those organizations (all collectively referred to as the "operators") from any and all claims, actions, damages, costs, expenses, and attorney fees, including those claims arising from the negligence of the operators, whether for bodily injury, either physical or emotional, property damage, or otherwise, which I or my child now have or

may hereafter accrue on account of my child participating in any activities in association with Camp Eva. I understand this means I, both individually and on behalf of my child, agree to not sue or otherwise bring a claim against any or all of the operators related to my child participating in activities associated with Camp Eva.

I further agree that any dispute arising out of this agreement or otherwise arising between the operators and myself or my child and resulting in legal action shall be adjudicated within the jurisdiction of a court located in the State of Indiana in Bartholomew County, and the laws of the State of Indiana shall apply.

I, the undersigned, have read this release and understand all of its items.

Signature of Parent/Guardian

Date