

REGISTRATION PACKET

Thank you for considering Camp No Limits in your 2015 plans!

Camp Dates

Florida: January 16th – 19th, 2015: Ellenton, Florida
(Application Deadline: November 16, 2014)

Camp sNOw Limits: February 27th – March 1st, 2015: Newry, Maine
{Separate application, see website}

Arizona: March 19th – 22nd, 2015: Prescott, Arizona
(Application Deadline: January 19, 2015)

Texas: March 26th – 29th, 2015: Burton, Texas
(Application Deadline: January 26, 2015)

Missouri: June 11th – 14th, 2015: Potosi, Missouri
(Application Deadline: April 11, 2015)

California: June 26th – 29th, 2015: Big Bear Lake, California
(Application Deadline: April 26, 2015)

Connecticut: July 8th – 12th, 2015: Hamden, Connecticut
(Application Deadline: May 8, 2015)

Idaho: July 19th – 22nd, 2015: Coeur d' Alene Lake, Idaho
(Application Deadline: May 19, 2015)

Maine: July 28th – August 1st, 2015: Rome, Maine
(Application Deadline: May 28, 2015)

Maryland: September 4th – 7th, 2015: North East, Maryland
(Application Deadline: July 4, 2015)

Please join us at any of our locations or more than one!!
The following pages are the application forms that MUST all be filled out.

PRINT OR TYPE LEGIBLY

Please return the following forms by the deadlines listed above:

- Registration Form
- *NEW*: Photo of camper and family photo of family members attending
- Family Form if family members attending
- Scholarship Application (please fill out if you plan to participate in fundraisers and/or financial need)
- \$50 Non-Refundable Application Fee
- Check or Money Order or Pay Online

Camp Fees

(Same at all locations)

Fundraising Your Fees

If you are fundraising your camp fees, the cost is \$500 per camper, sibling, parent or adult. This rate does NOT include travel, getting to and from camp, or camp merchandise purchases. FirstGiving is a great way to help you fundraise for your camp fees. You can choose to use our FirstGiving page to help you with raising these funds. Here you can track, manage and promote your fundraising efforts.

Please check out www.firstgiving.com/campnolimits

Rules around FirstGiving donation relative to Camp No Limits:

- Funds allow you to access food, lodging, and all program activities during your time at camp.
- Funds DO NOT cover travel fees to get to camp.
- If you have to cancel attending camp one year, funds raised cannot be carried over more than a two-year period.
- Please communicate all fundraisers to the Camp Director. Camp No Limits needs to be aware of any fundraisers and the amount raised.

Another fundraising option for you to consider is through the website Go Fund Me.

This option will allow you to raise funds that CAN go towards your travel costs. It is important to keep in mind that these donations are not tax deductible by Camp No Limits.

Please check out www.gofundme.com

Fundraising Packet

To assist you in your fundraising efforts, we have created a fundraising packet to help out. It is full of fundraising event ideas, tips and other resources to help make your fundraiser successful! The packet and other supporting materials are available on the Camp No Limits website.

Paying Own Fees

If you are paying your own camp fees, the cost is \$500 per camper, sibling, parent or adult. This rate does NOT include travel, getting to and from camp, or camp merchandise purchases. If you need some assistance covering camp fees, please fill out the attached scholarship form and learn more below.

Camp Scholarships

Camp No Limits fundraises and relies on sponsors to cover camp costs and reduce camp fees for families. If you are planning to pay out of pocket and require assistance with sponsorship, we will still ask you to attempt one of our fundraising options to help contribute to costs. Please complete the Camp No Limits Scholarship Application below. Scholarships are open to all to apply. Scholarship monies beyond this amount will be determined by staff or board review based on need. Please see application for further scholarship information.

PLEASE NOTE:

- **Please submit \$50 non-refundable application fee**
- **Campers under 3: free at MOST locations**
- **If you chose to stay off site and come by day, camp is \$300 per person flat fee. Please contact us to let us know your arrangements.**
- **BALANCE DUE 4 WEEKS PRIOR TO START OF CAMP**
- **NO REFUNDS ARE PROVIDED 8 WEEKS BEFORE CAMP STARTS (See dates above)**
- **ALL CAMPERS AGE 18 AND UNDER ARE REQUIRED TO ATTEND WITH A PARENT OR GUARDIAN UNLESS ARRANGEMENTS HAVE BEEN MADE WITH CAMP ADMINISTRATION. This is an educational camp for the whole family. We have the right to refuse any camper attending alone if we are not equipped with volunteers to assist with campers.**
- **FIRST TIME CAMPERS must attend with a parent or guardian unless arrangements have been made with camp administration.**

We are required to pay the host facility prior to camp and this is really difficult when families cancel at the last minute. Depending on the situation and the host facility, we may be able to use your funds towards another camp if there is an objectively valid reason you are not able to make it to the camp that you had chosen. We rely on sponsors, donations, and grants to fund our program so we appreciate your consideration when planning to attend.

We do everything we can to get all families interested in attending camp and helping as needed to reduce costs to families. **Serious inquiries are appreciated. If you need to cancel, please give us ample notice to find another family to fill your vacancy, as space is often limited!** Please make sure to fill out the scholarship form; we want to make sure anyone who wants to attend is able to attend. Often if we have a family in need, we can ask potential sponsors to sponsor or partially sponsor families. Although we cannot guarantee sponsorships, we have not yet had to turn away any individual with limb loss because of lack of funding! At the very least, we try to make sure the camper with limb loss and one parent are able to attend camp. We will work with you to come up with the best option for all.

IMPORTANT: All registrations must be received by deadline as camps are now filling up fast. PLEASE fill out all forms, type if possible or print very legibly. Our main source of communication is via email therefore it is extremely important that we can read your email address. If you do not hear back please email us to ensure we have the correct email address.

Please feel free to contact Mary with any further questions or concerns or if you have any ideas of sponsorship or companies that may want to sponsor our campers. Thank you and we look forward to seeing you in 2015!

CAMP NO LIMITS – CAMPER REGISTRATION

Camper Name:	Male/Female:	Date of Birth:
Street Address:	City/State:	Zip Code:
Primary phone number:	Cell phone number:	Parent/Guardian Name(s):
Email Address:	T-shirt size (to purchase at camp): Youth XS S M L Adult S M L XL XXL	Which location(s) are you applying to attend? _____ _____ _____

Please fill out the next section as specifically as possible!

Which Limb(s) affected? <i>Please indicate by checking/describing</i> Upper Extremity: Left Right Both Above Below Elbow At the shoulder Fingers Or explain:	Lower Extremity: Left Right Both Above Below Knee At Knee Symes Or explain:	Does camper have prosthetics? Please describe. Who is your prosthetist? _____ Prosthetist email address: _____
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We use this information and the goals you outline below to plan camp to meet your specific needs. Thanks for your help!

Have you attended CNL before? YES NO If yes, which camps?	What would you like to learn/accomplish at camp? Bike, run, swim, life skills etc., please describe! As a camper: _____ As a parent: _____ If bringing a sibling, what would they like to accomplish? _____ _____
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List any allergies to food or medications:	Dietary Restrictions (if any):	Medications/Dosage:
Emergency Contact:	Contact Phone:	
Physician Name:	Physician Phone:	Medical concerns we should be aware of:

RELEASE FORM For Camper: _____

Please initial all releases below and sign at bottom:

_____ **Liability Release:** I understand that by having myself or my child as a camper, family member or volunteer involved in camp related activities such as, but not limited to, hiking, horseback riding, athletic games, camp fires, as well as water activities such as swimming, kayaking, canoeing, fishing, jet skiing, water skiing and boating there is a risk of injury. I authorize and permit my child to participate in such activities and, on behalf of myself and my participating child, I assume all risk associated with said participation. I understand that if a medical emergency or an injury should occur at Camp No Limits that the No Limits Limb Loss Foundation will deal with the medical emergency as deemed medically necessary and with the protocols defined by the host facilities guidelines. I agree and acknowledge that any medical insurance that my child or myself has will be used and I release Camp No Limits, No Limits Limb Loss Foundation, the host facility, and their respective directors, officers, employees, volunteers, agents, successors, and assigns (hereinafter collectively the "Releasees") from responsibility or expense for any injuries sustained by me and/or my child while participating in Camp No Limits at any location. I further release the Releasees from any and all liability, loss, or damage, and waive any claim or demand therefor arising from or related to, directly or indirectly, attendance at Camp No Limits and participation in the activities thereof, at any location, whether or not said liability, loss, or damage was caused by the negligence, action, omission to act, or otherwise of the Releasees.

Furthermore, I agree to indemnify and hold harmless the Releasees from and against any claim, damage, liability, expense, or loss, including attorneys' fees and costs, incurred by them, or any of them, in defending any claim or demand arising from or related to, directly or indirectly, my or my child's participation in Camp No Limits and the activities thereof.

_____ **Photo Release:** I authorize the No Limits Limb Loss Foundation to take photos and videos for the use of promotional materials, pictures for sponsors and website development for the No Limits Limb Loss Foundation during the 2015 Camp No Limits season at any location. I release the Releasees from and for any loss, damages, and expense relating to or arising from this promotional release and/or the publicity associated therewith. I also agree to indemnify and hold harmless the Releasees from and for any expense or loss, including attorneys' fees and costs, incurred by them or any of them in defending any claim or demand arising from or related to, directly or indirectly, the aforementioned photos, video, and publicity.

_____ **Emergency/Medical Release:** I authorize emergency medical treatment of my child or myself, if such treatment is deemed reasonably necessary and appropriate by a licensed medical professional during Camp No Limits 2015 at any location, and basic over the counter medications, except as expressly set forth below, to be administered if needed for my child at camp, and, to the fullest extent permitted by law, I release the Releasees from and for any loss, damages, claim, liability and expense relating to or arising from, directly or indirectly, their decision to seek and/or provide emergency medical treatment or to administer basic over the counter medications.

The following over the counter medications shall not be administered without my expressed consent:

Signature of Parent or Guardian

Date

CAMP NO LIMITS – FAMILY REGISTRATION & RELEASE FORM

Camper Name: _____

FAMILY MEMBERS ATTENDING (Please do not include camper name):

NAME (first and last name)	Date of Birth	M or F	RELATIONSHIP TO CAMPER	T-SHIRT SIZE (to be purchased)

The following releases cover all person(s) listed above. Please initial beside each and sign at bottom:

_____ **Liability Release:** I understand that by having myself or my child as a camper, family member or volunteer involved in camp related activities such as, but not limited to, hiking, horseback riding, athletic games, camp fires, as well as water activities such as swimming, kayaking, canoeing, fishing, jet skiing, water skiing and boating there is a risk of injury. I authorize and permit my child to participate in such activities and, on behalf of myself and my participating child, I assume all risk associated with said participation. I understand that if a medical emergency or an injury should occur at Camp No Limits that the No Limits Limb Loss Foundation will deal with the medical emergency as deemed medically necessary and with the protocols defined by the host facilities guidelines. I agree and acknowledge that any medical insurance that my child or myself has will be used and I release Camp No Limits, No Limits Limb Loss Foundation, and the host facility, and their respective directors, officers, employees, agents, volunteers, successors, and assigns (hereinafter collectively the "Releasees") from responsibility or expense for any injuries sustained by me and/or my child while participating in Camp No Limits at any location. I further release the Releasees from any and all liability, loss, or damage, and waive any claim or demand therefor arising from or related to, directly or indirectly, attendance at Camp No Limits and participation in the activities thereof, at any location, whether or not said liability, loss, or damage was caused by the negligence, action, omission to act, or otherwise of the Releasees.

Furthermore, I agree to indemnify and hold harmless the Releasees from and against any claim, damage, liability, expense, or loss, including attorneys' fees and costs, incurred by them, or any of them, in defending any claim or demand arising from or related to, directly or indirectly, my or my child's participation in Camp No Limits and the activities thereof.

_____ **Photo Release:** I authorize the No Limits Limb Loss Foundation to take photos and videos for the use of promotional materials, pictures for sponsors and website development for the No Limits Limb Loss Foundation during the 2015 Camp No Limits season at any location. I release the Releasees from and for any loss, damages, and expense relating to or arising from this promotional release and/or the publicity associated therewith. I also agree to indemnify and hold harmless the Releasees from and for any expense or loss, including attorneys' fees and costs, incurred by them or any of them in defending any claim or demand arising from or related to, directly or indirectly, the aforementioned photos, video, and publicity.

_____ **Medical Release:** I authorize emergency medical treatment of my child or myself, if such treatment is deemed necessary and appropriate by a licensed medical professional during Camp No Limits 2015, and, to the fullest extent permitted by law, I release the Releasees from and for any loss, damages, claims, liability and expense relating to or arising from, directly or indirectly, their decision to seek and/or provide emergency medical treatment.

Please note any medical conditions/allergies we should be aware of for above participants:

Signature(s) of Parent(s) or Guardian for above participants

Date

Please provide any additional Information that would be helpful for planning for you to attend Camp No Limits including:

- Why you or your family would like to attend
- What you would like to learn about
- What you or your camper would like to accomplish

Please let us know if you have any specific needs pertaining to sleeping/lodging, your family, talent show, food/diets, swimming or biking. We will try our best to accommodate the needs you express but cannot guarantee we will be able to accommodate all. Some locations may charge more for private lodging. If you are interested in private lodging, this will be at your expense and not be a guarantee.



We will do our best to make you and your family comfortable but please keep in mind that this is a “family camp” and we all become a family during camp! Most lodging will require you to be in “dorm” style cabins. Cabins make ups with be either male or female. Those with younger families may have the option of co-ed arrangements, however, this is not a guarantee. Please bring earplugs and be ready to share space! If this is not your idea of fun, you may want to consider a local hotel for your comfort.

SCHOLARSHIP APPLICATION

Scholarship Criteria

In order to qualify for a camp scholarship you must meet and agree to certain criteria. Please review the information below and proceed with the application if you are agreeable with the outlined information. *Note: If you received a scholarship in previous years, it does not guarantee you will be a recipient this year.*

- Scholarship recipients must attend for the full camp stay
- Recipients must participate in all camp activities
- Recipients must send a follow up thank you to the sponsor who sponsors them
- Applications need to be received **two** months in advance

Scholarship Amount Requested: \$ _____

How much can you afford to contribute? \$ _____

Will you be willing to help with fundraising efforts to help reduce costs for you and your family?

Camper Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian Name: _____

Telephone () _____ (where we can reach you if we have questions)

How many people in immediate family? _____ Do both parents work? _____

Household Income: _____

How many family members will be attending camp? _____

Please write a brief summary of why you feel it is important for this child and family to attend camp:

Hanger Scholarships

Hanger Clinic Scholarships are available for first time campers! Scholarships cover full camp tuition for one parent and one child. This is a separate application that you can apply for. Please see our website for that application.