



These statements are important to answer truthfully in order to assess that Camp Unplugged is appropriate for your camper. We want to ensure that we are able to meet their needs safely and to maintain the safety of our staff and other campers.

**Camp Unplugged is not a clinical treatment program or a therapy or medical-based detox program.**

Camp Unplugged is an educational, Christian camp that provides a screen-free environment for the purpose of an electronic screen fast. Therefore, we reserve the right to refuse enrollment to Camp Unplugged or send a camper home if we feel they are a danger to themselves or others for any reason. **By signing this agreement, you are confirming to the best of your knowledge that the following is true:**

**Informed:** My son or daughter is aware that this camp has no internet access and that they will not be able to use video games, social media, email, or electronic screen devices while at camp. They are able to be with their screen device for a day without violent reactions. He or she agrees to abide by the electronic screen fast and the camper knows to inform camp staff if feeling headachy, hopeless, depressed, irritable, violent, or extreme fatigue while at camp.

**Self-Harm:** My son or daughter has no history of suicide attempts or destructive behavior regarding their own body. This includes hospitalization for depression, suicidal intention or ideation, cutting or burning self.

**Violence:** My son or daughter does not have a history of fighting, interaction with school or law enforcement due to aggressive behavior, bullying/cyberbullying, destruction of property at home or school, criminal activity, aggressive actions toward siblings, parents, other people or animals.

*Neither parents of camper, legal guardians, care givers, teachers or relatives have ever felt the need to call the police on this child, nor has he or she threatened bodily harm to others.*

**Sexual:** My son or daughter does not have a history of sexual acting out. They have not had any interactions with school staff, medical professionals, or law enforcement due to inappropriate touching, sexting, or pornography use.

**Medical/Mental Status:** My son or daughter has not been diagnosed with or experienced psychosis, dissociative episodes (such as game-transfer phenomena), gamer rage, moderate to severe depression, Oppositional Defiant Disorder, suicide attempts or hospitalization for mental illness.

*My child is physically healthy enough to be at camp. Medical issues will be on the medical history form of which Camp Unplugged needs to be aware. Any medical issues indicated do not prevent participation in the camp such as: mild asthma, allergies, and/or physical limitations.*

**Substances:** My son or daughter is not physically/emotionally dependent on alcohol, recreational drugs, or nicotine products to function daily.

**Financial Liability if Camper is Sent Home:**

I understand that my son/daughter, \_\_\_\_\_, will be sent home at the **parent or guardian's expense with no refund of camp fees**, if they display or express any behavior that is deemed a danger to themselves or others at camp.

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date