

CAMP SHADOW PINES RULES AND REGULATIONS

THE UNDERSIGNED AGREES THAT IT WILL HOLD HARMLESS AND INDEMNIFY CONCERN INC., THE U.S. FOREST SERVICE AND CAMP SHADOW PINES, THEIR OFFICERS, AGENTS AND EMPLOYEES FROM ANY LIABILITY, CLAIMS, OR DAMAGES THAT MIGHT ARISE USING THE CAMP FACILITY AND INCLUDING TRANSPORTATION TO AND FROM THE CAMP. THE UNDERSIGNED WILL PROVIDE A CERTIFICATE OF INSURANCE SHOWING CONCERN, INC., AND THE U.S. FOREST SERVICE AS ADDITIONAL INSURED AT LEAST 30 DAYS PRIOR TO THE CAMP DATE.

THE USER ORGANIZATION AGREES TO ABIDE BY THE FOLLOWING RULES:

1. ARRIVAL AND DEPARTURE TIMES MUST BE STRICTLY ADHERED TO.
2. BUILDINGS AND/OR DORMITORIES TO BE ASSIGNED BY MANAGER.
3. SMOKING IN DESIGNATED AREAS ONLY - FOREST SERVICE REGULATIONS ARE STRICTLY ENFORCED.
4. NO ALCOHOL, DRUGS, FIREARMS OR FIREWORKS.
5. ABSOLUTELY NO PETS, EXCEPT FOR WORKING DOGS.
6. ONLY EMERGENCY PHONE CALLS WILL BE ACCEPTED FOR CAMPERS.
7. USERS MAY NOT MOVE BUNK BEDS WITHOUT PERMISSION, CLEANING DEPOSIT MAY BE FORFEITED.
8. USERS ARE TO KEEP ALL FACILITIES NEAT AND ORDERLY. ALL AREAS ARE TO BE CLEANED BEFORE DEPARTURE. AN INSPECTION WILL BE MADE AT COMPLETION OF EACH CAMP.
9. USER ORGANIZATION WILL BE RESPONSIBLE FOR ANY DAMAGE CAUSED BY CAMPERS.
10. ALL ATHLETIC EQUIPMENT MUST BE RETURNED. A CHARGE WILL BE MADE FOR LOST OR DAMAGED ITEMS.

MEAL TIMES: BREAKFAST 8:00 AM LUNCH 12:00 PM DINNER 5:00 PM

CONCERN, INC. IS A NON-PROFIT CORPORATION OPERATING CAMP SHADOW PINES UNDER PERMIT FROM THE U.S. FOREST SERVICE. OUR INTENTION IS TO GIVE AS MANY PEOPLE AS POSSIBLE, WITHOUT RESTRICTION AS TO RACE, COLOR OR CREED, THE OPPORTUNITY TO ENJOY A MOUNTAIN TOP EXPERIENCE. EMPHASIS IS MADE FOR HANDICAPPED AND DISADVANTAGED PERSONS. WITHIN OUR PERMIT WE MUST COMPLY WITH CERTAIN RULES AND RESTRICTIONS. THESE ARE OUTLINED ABOVE AND ALL USERS AGREE TO COMPLY AS PART OF THIS CONTRACT PERMITTING THEIR USE OF THE CAMP. VIOLATIONS COULD, AT THE DISCRETION OF **CONCERN, INC.** RESULT IN CANCELLATION OF THIS CONTRACT.

I have read and agree to the above rules and conditions

(Responsible Party)

(Date)

(Printed Name)

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