



MEMORANDUM OF UNDERSTANDING

Church/Group

Organization _____

Address _____

Group Leader _____

PURPOSE

The purpose of this MOU is to clarify the expectations and requirements for group leaders bringing campers to Elevate Camps.

Elevate Camps partners with local churches and other organizations to provide a quality Christian camp experience for their students. We offer a unique arrangement whereby groups maintain supervision of their students in cooperation with Elevate staff. To ensure the safety and wellbeing of all campers Elevate is asking all our groups to acknowledge and agree to the terms of this memorandum of understanding.

STAFF/COUNSELORS

Groups will do due diligence to bring only qualified, trustworthy counselors who have passed a background check or other process by which they are satisfied with the qualifications of all staff and counselors who will work with students. **Camp Group** will not hold liable Elevate Camps for the actions of the staff and counselors under **Camp Group's** authority.

- The California regulations for organized camps require that counselors be at least 18 years of age.
- There must be a qualified counselor for every 10 campers.
- To meet the requirements of the California Regulations For Organized Camps Counselors must complete the online "Principles of First Aid" training and submit the form.
- We require all counselors to read the Elevate Counselor Handbook
- We allow counselors in training or co-counselors to pair with qualified counselors in cabins.

INSURANCE

Groups will provide Elevate with a Certificate of Insurance naming Elevate as "additionally insured"

HEALTH & SAFETY

All campers, counselors, and staff are required to turn in a completed Elevate health and release form upon arrival at camp. Only those 18 and under must have completed the immunization section. (Parents objecting to immunizations may state the objection based



on religious or personal beliefs and sign it.) **Health forms must be retained by Elevate Camps.**

All groups will perform a pre-camp health screening prior to arrival at camp. (download the pre-camp health screening guide on our website) You can use the **one** form as a tool to screen your campers. We do not need a form for each camper. Simply turn in the **one** form as a record that you performed the screening.

The Youth Pastor or Group Leader and their counselors are the primary supervisors of their students while at camp. As the front line of care for the students they must report all health and safety issues to Lead Counselors and Elevate Directors.

VANDALISM/DAMAGE

Camp Group will reimburse Elevate Camps for damage or vandalism above normal and customary wear to the property or equipment while at camp. Please report any damage to Elevate staff.

CONDUCT/RULES/POLICIES

Camp Group will agree to adhere to the rules of conduct for counselors, staff, and campers found in the Elevate Counselor Handbook.

REGISTRATION

An accurate list of campers, counselors, and housing preferences should be provided at least a week prior to arrival. Changes should be communicated as soon as possible to facilitate the housing and registration process. Please use the online form with the link sent to you by our registration team. Groups that do not provide t-shirt sizes by the deadline will be asked to pick up camp shirts last.

DEPOSIT POLICY

The group deposit is **nonrefundable** and confirms your registration. Deposits hold your spots, we turn away other campers once beds are full. We recommend calling to release overbooked spots as soon as possible. If we are able to fill those spots with other campers we will apply your deposits to your total bill. If we are not able to find last-minute campers we will not refund your deposit or apply it to your final bill.

All of us at Elevate look forward to serving you at camp. We value your partnership and collaboration in providing a safe, fun and life-changing camp experience. By signing and returning this MOU you certify that you have read, understood, and agree to the terms and conditions of this MOU as set forth herein. *(Retain a copy for your records)*

SIGNATURE

DATE

PRINT NAME AND TITLE