TEENS, Inc. Outdoor Leadership

Great Sand Dunes National Park, Colorado ~Summer 2019~

June 10th to June 14th

Dear Parents / Guardians and TEENS, Inc. Youth,

The TEENS, Inc. Leadership Retreat is an introduction to thriving in the wilderness. Extensive prior experience is not necessary but a desire to push boundaries and embrace new experiences in the outdoors is preferable. The aim of the Leadership Retreat is for students to take ownership of their own experience and we will put them in leadership situations where they will be making decisions for themselves and the group all while having the support of experienced instructors to facilitate the experience and manage group safety.

Two TEENS, Inc. Staff will be facilitating and instructing the trip. Ryan Cummings, TEENS, Inc. Outdoor Leadership Director, and Cait Healey Teen Center Director. Ryan is certified by Leave No Trace as a Master Educator as well as by the American Mountain Guides Association as a Single Pitch Climbing Instructor. Ryan is also a certified Wilderness First Responder, with a decade of experience leading groups in the outdoors. Students can expect curriculum beyond technical skills and will be encouraged to use communication skills as a group. Every evening we will have meetings as a group to discuss important topics and process the day.

Tuition is based on a sliding scale. Please see the tuition section in this packet. Fees paid cover a portion of the cost of food, gas, equipment purchased, permits, and staff time. The majority of these costs are covered by grants and individual donations. Cost will never be a factor in a student being able to attend. Scholarships are available in many capacities. Please contact if payment is a concern or if you feel you can sponsor another student’s trip. Please review all the information provided and complete the registration and safety forms. Take your time reviewing the packet in its entirety. If you still have questions remaining, please feel to call. We will be holding a parent meeting for all families whose teens are attending the trip. This is for families to gain more information about the trip and meet the staff that will be facilitating. Students are also highly encouraged to attend this meeting.
Weather and locations:

The high desert environment is very similar to the front range. It is high, and dry with not a lot of potential to hide from the wind/rain. We will be in a high desert, where shade is a luxury. During the Summer months there is always a possibility of thunderstorms which can at times produce heavy rain, high winds and lightning. Because of this potential for inclement weather, we will be prepared with all the necessary clothing and equipment to be safe, warm and dry during this trip. As with any outdoor environment we cannot control the weather and will have to be flexible and adapt to whatever Mother Nature throws at us. That said, weather can make conditions less than desirable and participants must be willing to stay positive and make the best of every situation. Hopefully this will not be an issue. In terms of the topography, this area is full of amazing broad landscapes and fascinating ecological diversity.

Equipment, water and food:

TEENS, Inc. can provide all technical equipment (tents, camping gear, sleeping bags), and will purchase all the food. Our group will be expected to come prepared with clothing appropriate for our activities; the equipment list required for this trip is attached. No worries if you do not have all the items needed for the trip as we are able to provide most of them for you. The snacks will be simple camping style foods such as granola, oatmeal, PB&J, summer sausage, cheese, granola bars, trail mix. Dinners will include: rice, beans, cheese, protein, and pasta. In addition, we will be making pizzas from scratch!

*We supply all food- students may NOT bring snacks or any food on the trip.*

They can bring money and will be allowed to buy snacks when we stop for gas.

Behavior and expectations:

We anticipate all our students will have an excellent time, live up to expectations and get as much out of the experience as possible. We want to have lots of fun and challenge ourselves to learn new skills, while working as a team and getting to experience new places. Our expectation is that students will push themselves to their personal limits, be motivated to learn new skills, and will be open to group development and community building. Although fun is a likely outcome, sometimes these experiences may be emotionally or physically challenging. We will have to stick together as a group and help one another persevere through personal challenge. Undesirable weather conditions may cause rapid changes to itinerary and unpleasant conditions. In addition we will be sharing these public lands with a variety of other user groups and may experience some user related impacts. We may get wet, cold, hungry, tired and exhausted. However, our hope is students choose to persevere in these experiences with a positive attitude and help their group members through these challenges as well.
Our **non-negotiable behaviors** include: bringing or using alcohol, drugs and tobacco, violence of any form, abusive language or behavior, bringing or using electronic devices, bringing or using weapons, and sexual contact of any kind, including PDA. For all of these behaviors we will have serious discussions about whether the participant involved will be able to remain on our trip. If a serious breach of these expectations is made students will be picked up within 6-8 hours by family members, or evacuated by TEENS, Inc. staff members at a cost of $400 to the family. This will also result in the loss of tuition and any potential references for resume. We do not anticipate that we will encounter any of these non-negotiable behaviors, and our students will have no problems living up to our expectations.

**Risk Tolerance and Risk Management**

As with all outdoor endeavors, the activities facilitated during TEENS, Inc. Outdoor Leadership Programs have inherent risks associated with engaging in these activities. With this in mind, TEENS, Inc. staff has adopted a risk management strategy focused on specific site management which helps to identify and manage individual risks associated with each giving site where these activities are facilitated. However, due to the nature of some of the risks associated with outdoor activities (weather, other users, and wild animals) we cannot guarantee that we will be able to foresee or alleviate all potential hazards. With this in mind TEENS, Inc. staff may choose at any point to stop or discontinue any activities at any given time if they feel that the risk of an accident, injury or potential harm is too great or outweigh the potential benefits. For more information concerning these specific risks please review the Liability and Assumption of Risk Waiver in detail and make sure you are completely comfortable and understand these risks. For further question please contact Ryan Cummings the Outdoor Leadership Director at 303-258-3821 ex.13 or by email at Ryan@teensinc.org

**Communication and Emergency Management**

Lead TEENS, Inc. Staff is certified as a Wilderness First Responder, and trained in emergency response. **There will be no contact with families while we are away. Families can work with the assumption that no news is good news. We will call on the last day to let people know we are safe and confirm pick-up time.** If a family emergency arises, parents / guardians are to contact Stephen LeFaivre or Alisa Musser at (303) 258-3821.

**TEENS, Inc. emergency and inquiries contact telephone numbers:**

TEENS, Inc. **Main Number:** (303) 258 - 3821 x12

**After Hours Emergency number while students are away:** (303) 562 - 4895

**Equipment and Gear**
This is a complete list of personal gear students need to have on the trip. We understand most families don’t have all this gear at home so we can provide most of the major items. If the item has a ☐ next to it, TEENS, Inc. can provide it. We have an extensive supply of gear for students to use and we encourage students to use our high quality gear.

All of your packed items must fit into one duffel or large bag. We have limited packing room!

Personal Clothing:

All these items need to be synthetic, fleece or wool. No cotton at all please

☐ T-Shirts x4 ☐ ☐ Shorts x 2- Synthetic like basketball shorts
☐ Rain Jacket and Pants ☐ ☐ Synthetic/wool Long Underwear top ☐
☐ Synthetic/wool Long Underwear leggins ☐ ☐ Warm Fleece Jacket x 2 ☐
☐ Warm Fleece Pants ☐ ☐ Hiking Pants ☐
☐ Underwear ☐ ☐ 3 pairs of wool socks ☐
☐ Brimmed Hat ☐ ☐ 1 or 2 Swimsuits

Personal Equipment:

☐ Hiking Boots ☐ ☐ Camp Shoes (Lightweight, closed toed shoes. Not sandals or flip flops)
☐ Large backpacking pack ☐ ☐ Day hiking pack ☐
☐ Sleeping Pad ☐ ☐ Head Lamp/flash light ☐ ☐ Plastic Bowl/Cup/Spoon
☐ 3 large water bottles ☐ ☐ Sunglasses
☐ Sleeping Bag ☐ Twenty degrees or warmer, no heavy cotton style bags

Other:

☐ Any personal medications and inhalers
☐ Toothbrush/toothpaste ☐ ☐ Sun Screen ☐
☐ Camera (optional) ☐ ☐ Journal/pen ☐ ☐ Book (optional)

Packing Ideas and tips: You may bring a cotton t-shirt to hike in when it is hot or wear to bed but the majority of your gear will not be allowed to be cotton because it can hold moisture and make you really cold.

This means: No jeans, No cotton socks, No cotton hoodies.
Keep everything as light as possible! EG: small plastic fork and Tupperware (not metal or glass), no extra clothes or toiletries, small flashlight or headlamp.

NO ELECTRONICS, TOBACCO/VAPES, DRUGS, ALCOHOL, WEAPONS, OR HUNTING KNIVES!
INSTRUCTIONS

All the questions on this form are important. The answers are needed in order to assess your level of participation in a field trip. Please answer every question in every section and return the form as soon as possible, in order to allow time for any needed follow-up. Incomplete forms will slow down the screening process, and may prevent you from being able to participate in your field trip.

PART I General Information

APPLICANT
Name ___________________________ Date __________
Gender  ☐ Male  ☐ Female
Age       DOB __/__/____
Address ___________________________ Apt. _______
City/State/Zip ___________________________

Daytime Telephone # (____) ___________
Evening Telephone # (____) ___________
FAX # (____) ___________ email ________

Do you speak/understand English? Yes ☐ No ☐

PARENT/GUARDIAN
Name ___________________________
Home Telephone # (____) ___________
Work Telephone # (____) ___________
FAX # (____) ___________ email ________

EMERGENCY CONTACT (other than parent/guardian)
Name/Relationship ___________________________
Daytime Telephone # (____) ___________
Evening Telephone # (____) ___________
Cell Phone # (____) ___________ email ________

FAMILY PHYSICIAN
Name ___________________________
Telephone # (____) ___________ FAX # (____) __________

INSURANCE INFORMATION (We do not require insurance, but it is helpful if you do have it)
Provider ___________________________
Policy Number ___________________________

PART II Medical Information

A. Allergies (Including allergies to medicines, foods, insect bites/stings)  NONE ☐ or...

<table>
<thead>
<tr>
<th>Allergy</th>
<th>Reaction</th>
<th>Medication Required (if any)</th>
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B. Medical conditions (Other medical issues/illnesses/symptoms/ requirements/prosthetic device(s))  NONE ☐ or...

<table>
<thead>
<tr>
<th>Condition</th>
<th>Symptoms and treatment</th>
<th>Medication Required (if any)</th>
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### C. Current Medications (Including psychiatric medication, over-the-counter medication, inhalers)

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<tr>
<th>Medication</th>
<th>Taken For: (Symptom/Condition)</th>
<th>Dosage</th>
<th>Date Started</th>
<th>Current Side Effects</th>
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TEENS, Inc. recommends that all participants have a current tetanus immunization (within 10 years).

### PART III   Health Profile

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<tr>
<th>#</th>
<th>Please 1 one—If yes, describe below</th>
<th>Y</th>
<th>N</th>
<th>#</th>
<th>Please 1 one—If yes, describe below</th>
<th>Y</th>
<th>N</th>
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<tr>
<td>1</td>
<td>Seizure within the past 1 year</td>
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<td>6</td>
<td>Use of Tobacco/Smoker</td>
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<td>2</td>
<td>Hospitalization/Emergency Room/Urgent Care visit within the past 1 year</td>
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<td>7</td>
<td>Current Neck/Back/Shoulder/Knee/Ankle/or other joint problem</td>
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<td>3</td>
<td>Asthma (if yes, please bring inhaler)</td>
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<td>8</td>
<td>Currently Pregnant</td>
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<td>4</td>
<td>Unexplained chest pain/pressure, shortness of breath, rapid heartbeat, sweats, or exertional dizziness or faint spells</td>
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<td>9</td>
<td>Bedwetting</td>
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<td>5</td>
<td>Other cardiac conditions, e.g., heart murmur or other rhythm abnormality</td>
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<td>10</td>
<td>Diagnosed Learning Disability and/or ADD/ADHD</td>
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### B. Food allergies and preferences  (this helps us design our menus)

Please list all the foods that you avoid in your diet and state whether this is a personal preference/religious reason or a diagnosed allergy.

<table>
<thead>
<tr>
<th>Food or ingredient</th>
<th>Diagnosed Allergy or personal preference?</th>
<th>Common Side Effects</th>
<th>How long since you have eaten this?</th>
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### C. Current Exercise Activity  (Needed as important assessment tool)

Please list the activities you do on a daily or weekly basis which show your current fitness level. Be sure to include activities such as walking a pet, playing basketball, skateboarding, skiing, etc.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Frequency</th>
<th>Approximate Time/Distance</th>
<th>Leisurely</th>
<th>Moderately</th>
<th>Intensely</th>
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### D. Swimming Ability  (needed as important assessment tool)

1. Can you swim 150 ft in flat water comfortably without stopping? [Yes] [No]
2. Have you ever received swimming lessons in your life? [Yes] [No]
3. If you answered yes to the above question, when do you receive lessons? Year: [ ] Age: [ ]
4. If you are a non-swimmer do you have a means to get swimming lessons prior to this program? [Yes] [No]
### E. Personal History

<table>
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<tr>
<th></th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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<tr>
<td>1</td>
<td>Have you been in counseling with a psychiatrist, psychologist, social worker, or other therapist within the past 2 years?</td>
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<td>2</td>
<td>Are you currently in counseling or treatment with a therapist, psychiatrist, psychologist, or prescribing physician?</td>
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<tr>
<td>3</td>
<td>If you answered yes to numbers 1 or 2 above please arrange for a release of information with your therapist and/or prescribing physician so we may contact them for further information, if needed as part of this screening process. Have you done so?</td>
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4. **Please check the appropriate responses that indicate the reason(s) for counseling:**
   - [ ] Academic/Career
   - [ ] Divorce
   - [ ] Family Issues
   - [ ] Eating Disorder
   - [ ] Suicide
   - [ ] Other

5. **Name of current (or most recent) therapist**
   - Telephone #: (______)
   - FAX #: (______)
   - Email: __________________

6. **Name of prescribing physician**
   - Telephone #: (______)
   - FAX #: (______)
   - Email: __________________

### PART IV Signature Required

Consent is hereby given for the applicant to attend the field trip and permission is given for any emergency anesthesia, operation, hospitalization or other treatment that may become necessary.

All information will remain confidential. You should know that over the years, many students with a variety of medical/psychological challenges have successfully participated in our field trips, but we must be aware of these conditions. Failure to disclose such information could result in serious harm to you and your fellow participants.

- **Parent’s/Guardian’s Signature (if applicant is under legal age)**
  - Date

- **Applicant’s Signature**
  - Date

### PART V Consent for Emergency Medical Treatment

Recognizing the possibility of injury or illness due to participation in a Wilderness or Adventure Based Course, I authorize TEENS, Inc. staff, representatives, contractors or other medical personnel to obtain or provide medical care for my child, to transport my child to a medical facility and to provide treatment they consider necessary for participant’s health, and will pay all associated costs. I agree to the release (to or by TEENS, Inc.) of any medical records necessary for treatment, referral, billing or insurance purposes;

- **Parent’s/Guardian’s Signature (if applicant is under legal age)**
  - Date

- **Applicant’s Signature**
  - Date
TEENS, Inc: Acknowledgment and Assumption of Risks & Release and Indemnity Agreement
For the Participant and the Parent or Legal Guardian of a Minor Participant

INTRODUCTION:
Please read this Acknowledgment and Assumption of Risks & Release and Indemnity Agreement (hereafter “Document”) carefully before signing. Participants 13 yrs. of age or older must sign this Document. If the participant is a minor (minors are those under 18 years of age; hereafter sometimes “minor” or “child”), one of the participant’s parents or legal guardians (collectively referred to in this Document as “parent”) must also sign. In consideration of the services of TEENS, Inc., a non-profit organization, and its officers, directors, employees (including faculty and other staff), agents, representatives, physician advisors, volunteers, independent contractors and all other persons or entities associated with it (individually and collectively referred to in this Document as “TEENS, Inc.”), I (participant and/or parent of a minor participant) acknowledge and agree as follows:

TEENS, Inc., contracts with individuals or organizations that are independent contractors (not its employees or agents) to provide some of the services and activities participant may engage in. TEENS, Inc. does not supervise or control these contractors and is not legally liable or responsible for their conduct. In addition, activities may take place at facilities or on premises not owned by, or associated or affiliated with TEENS, Inc. TEENS, Inc. does not oversee, supervise, or take responsibility for any aspect or condition of these independent services, activities, facilities or premises.

NOTE: Participants who participate in youth employment may engage in activities that cause injury, damage, death or other loss outside the scope of protections and benefits afforded to youth employees under applicable workers’ compensation laws. This Document will not affect the protections and benefits afforded to a participant under applicable workers’ compensation laws for injuries, death or other loss occurring to the participant arising out of and in the course of his or her employment with TEENS, Inc.

ACTIVITIES, RISKS AND ACKNOWLEDGMENT AND ASSUMPTION OF RISKS:
Participating (whether simply attending, observing or actively participating) in TEENS, Inc. year around educational, instructional, recreational and/or adventure activities includes risks. These activities, including but not limited to those associated with TEENS, Inc. youth/teen programs or day camp, youth employment or Chinook West High School, can take place on or off TEENS, Inc. premises in Colorado or in other locations in the United States. Activities (which may be provided or led by TEENS, Inc. staff, volunteers, contractors or others) may include, but are not limited to: hiking and peak ascents; backpacking; rock climbing or bouldering (indoors or outdoors on artificial surfaces or natural rock); camping; horseback riding; whitewater rafting; canoeing, kayaking or other boating; swimming; bike riding; downhill or cross country skiing; snowshoeing; sledding; skateboarding; woodworking; ropes or challenge course activities; athletic conditioning including use of weights or weight room activities; athletic sports and/or games; physical education classes; open gym access; socializing; trips to museums, amusement parks, backcountry huts or other facilities; community service and work projects involving weed or plant removal, tree planting, erosion control, trail building, youth leadership or other activities; outdoor cooking or other chores; participant’s responsibilities related to these activities or otherwise; use of any other equipment, facilities or premises; and travel on chairlifts or other means or in airplanes, vans, buses or other vehicles to and from activities or otherwise (collectively referred to in this Document as “activities”). These activities may be day or multi-day, mandatory or optional, scheduled or unscheduled, supervised or unsupervised, occur as independent opportunities and include activities undertaken during participant’s free and/or independent time. I acknowledge that the inherent and other risks, hazards and dangers (collectively referred to in this Document as “risks”) of these activities can cause injury, damage, death or other loss to participant or others. The parent gives permission for their child to participate in all activities and agrees to discuss the nature of these activities and risks with their child. The following describes some, but not all of the risks:

Risks present in an outdoor or wilderness environment. These risks include travel in high altitude, mountainous or wilderness terrain both on and off trail. Participants’ travel may be subject to storms, including lightning, strong winds, rain or snow; fast moving rivers or other water bodies; difficult stream crossings; currents or whitewater; flashfloods; falling or unstable rocks; avalanches; extremely hot (geothermal) or cold weather or water; falling or fallen timber; stinging, venomous and/or disease carrying animals, insects or microorganisms; poisonous plants; wild animals and other natural or man-made hazards. Land/water hazards may not be marked or visible and weather is always unpredictable.

Risks involved in judgment and decision making. These risks include the risk that the participant or a co-participant, TEENS, Inc. staff member, contractor, volunteer or other person may misjudge the participant’s (or others) capabilities, health or physical condition, or misjudge some aspect of instruction, medical treatment, weather, terrain, water conditions or water level, or route location. This includes the participant’s judgment in managing his or her own health issues, including any responsibility for self-medication.

Personal health and participation risks. The risk that participant’s mental, physical or emotional condition (including use or abuse of prescription or non-prescription drugs), whether disclosed or undisclosed, known or unknown, combined with participation in these activities could result in injury, damage, death or other loss. Although TEENS, Inc. staff may review participant’s submitted health information, TEENS, Inc. cannot anticipate or eliminate risks or complications posed by participant’s mental, physical (including fitness level) or emotional condition.

Community service and work project risks. These risks include those associated with activities such as building, digging, lifting, painting, construction, trail repair and maintenance and clean-up projects. Projects may include the use of tools and equipment (i.e. drills, saws, power tools, axes, pulaskies, ladders) that can cause injury resulting from use, misuse or malfunction.

Risks associated with any outdoor or athletic activity. These risks include the risk that a participant may overestimate his/her abilities or fitness; be inattentive; lose control and trip or fall and/or collide with others, the ground, rocks or trees or encounter other water/terrain/road/trail hazards; not understand the functioning of (or misuse) the equipment; fail to negotiate steep, uneven or difficult terrain; not control his/her speed or experience equipment malfunction.

Page 1 of 3 – Please read all pages carefully and sign on page 3!
**Equestrian Risks.** Riding or dealing in any way with horses or other equines (collectively "horses") includes risks. Horses are always unpredictable and without warning, can kick, bite, stamp, rear, bolt, fall and react to the environment, movements, noises, vehicles, people, other animals or objects. Horseback riding can involve equipment that may break, saddles that may slip and other riders who may not control their animals. **WARNING:** Under Colorado law, an equine professional is not liable for an injury to or the death of a participant in equestrian activities resulting from the inherent risks of equestrian activities, pursuant to section 13-21-119, Colorado Revised Statutes.

**Climbing Risks.** Risks include the possibility of slipping and falling partway or to the ground; belayer or lead climber inattention or error; rope burns; pinches; jolts; falling rock; losing grip on the rock and impacting the rock face, objects, or people.

**Rafting or other boating and swimming risks.** These risks include potential water obstacles or hazards such as rapids, boulders, trees, fences, waterfalls, holes, reversals; slipping on wet rocks or jumping off rocks into the water; falling overboard; impacting the bottom of a river or other water body; being swept into a river current or experiencing a boat capsize or collision.

**Risks connected with geographic location.** Activities may take place in remote places, several hours or days from medical facilities, causing potential delays or difficulties in communication, transportation, evacuation and medical care. Although TEENS, Inc. staff, contractors or others may have wireless communication devices (including cell or SAT phones) while conducting programs both on and off TEENS, Inc. grounds, use of these devices in outdoor, mountainous and/or wilderness terrain or in other locations is unreliable and inconsistent.

**Risks associated with premises.** An indoor climbing wall, a foam pit and other recreational facilities, as well as ruts, slippery walkways, uneven ground or other conditions exist in and around the TEENS, Inc. grounds or other premises.

**Equipment Risks.** The risk that equipment used in an activity may be difficult to use, misused, or may break, fail or malfunction. This includes participant's personal equipment, TEENS, Inc. equipment or any other equipment (whether purchased, borrowed or rented). Participants choosing to bring and use their personal equipment (including any safety gear) assume full responsibility, along with their parent, for choosing appropriate equipment and for the fit and condition of their equipment. If participant is using safety gear, such gear may prevent or lessen injuries in some instances; however, use of safety gear is not a guarantee of safety, and injury can occur even with the use of this gear.

**Cooking and camping risks.** Risks include gas explosion, scalding or other burns associated with tending, being near, or cooking over a gas stove or open fire, and water contamination in natural water sources. Camp sites may be subject to high winds, falling trees and/or branches, floods, wild animal invasion, or other hazards. All water may be contaminated and should be disinfected, filtered or boiled before use.

**Free Time Risks.** Participants will have free or independent unsupervised time before, during and after the start of activities and at various other times. Unsupervised time may include free or independent time alone or with others and brief periods of time, stationary and alone in the field (solos). Participants will not be directly supervised or watched during nighttime sleeping hours. During both supervised and unsupervised activities, all participants share in the responsibility for their own well-being and that of the group.

**Risks regarding conduct.** The potential that participant, co-participants or third parties may act carelessly or recklessly.

These and other risks may result in participants: falling partway or falling to the ground; being struck: colliding with or impacting objects, people, the rock face or the bottom of a river or other water body; experiencing vehicle or boat collision, capsizing or rollover; getting caught or entangled in objects above or below water; reacting to high altitudes, weather conditions or increased exertion; becoming lost or disoriented; suffering gastro-intestinal complications or allergic reactions or experiencing other problems. These and other circumstances may cause heat or cold related illnesses or conditions (including hypothermia, hyperthermia, cold water immersion, frostbite or heat exhaustion/stroke), dehydration, drowning, high altitude sickness, heart or lung complications, broken bones, paralysis or other permanent disability, mental or emotional trauma, concussions, sunburn or other burns, infections, cuts or wounds or other injury, damage, death or loss.

I (participant and/or parent of a minor participant) agree:

- to review all TEENS, Inc. information received, complete all required forms, and abide by the terms of those forms and all rules/policies;
- TEENS, Inc. representatives are, and have been available should I have further questions about the activities or associated risks;
- to disclose to TEENS, Inc. representatives any mental, physical or emotional condition/s or limitation/s which might affect participant's ability to participate, and represent that participant is fully capable of participating without causing harm to himself/herself or others;
- the information provided above is not exhaustive, other unknown or unanticipated activities, risks, and outcomes may exist, and TEENS, Inc. cannot assure participant's safety or eliminate any of these risks;
- Participant is voluntarily participating with knowledge of the risks. Therefore, participant and his/her parent assume and accept full responsibility for participant; for the inherent and other risks (both known and unknown) of these activities and for any injury, damage, death or other loss suffered by participant (and his/her parent), resulting from those risks, including the risk of participant's own negligence or other misconduct (outside the scope of protections and benefits afforded to a youth employee under applicable workers' compensation laws).

**RELEASE AND INDEMNITY AGREEMENT:**
Please read carefully. This Release and Indemnity Agreement contains a surrender of certain legal rights. Some federal land agencies may restrict service providers from seeking releases of liability for negligence, for injuries or other losses occurring while operating under permit on federal lands. Therefore, except to the extent a court determines these federal restrictions apply to TEENS, Inc. as a matter of law, I (adult participant, or parent for myself and for and on behalf of my participating minor child), agree as follows: 1) to release and agree not to sue TEENS, Inc., with respect to any and all claims, liabilities, suits or expenses (including attorneys’ fees and costs) (hereafter collectively “claim” or “claim/s”) for any injury, damage, death or other loss in any way connected with my/my child’s enrollment or participation in these activities, including use of any equipment, facilities or premises (which claim/s fall outside the protections and benefits afforded to a youth employee under applicable workers' compensation laws). I understand I agree here to waive all claims/I or my child may have against TEENS, Inc., bind my/my child’s estate and any family member/their/other party bringing claim/s, and agree that neither I, my child nor anyone acting on my or my child’s behalf, will make a claim against TEENS, Inc. as a result of any injury, damage, death or other loss suffered by me or my child;

Page 2 of 3 – Please read all pages carefully and sign on page 3!
2) to defend and indemnify ("indemnify" meaning protect by reimbursement or payment) TEENS, Inc., with respect to any and all claim/s brought by or on behalf of me, my participating child, spouse or other family member/s, my/my child's heir/s or estate, a co-participant or any other person for any injury, damage, death or other loss in any way connected with my/my child's enrollment or participation in these activities, including use of any equipment, facilities or premises (which claim/s fall outside the protections and benefits afforded to a youth employee under applicable workers' compensation laws). This Release and Indemnity Agreement includes claim/s of or resulting from TEENS, Inc.'s negligence (but not its gross negligence or willful and wanton misconduct), and includes claim/s for personal injury or wrongful death (including claim/s related to emergency, medical, drug and/or health issues, response, assessment or treatment), property damage, loss of consortium, breach of contract or any other claim.

OTHER PROVISIONS:
I (participant and/or parent of a minor participant) agree:

- Colorado substantive law (without regard to its "conflict of laws" rules) governs this Document, any dispute I or my child have with TEENS, Inc. and all other aspects of our respective relationships with TEENS, Inc., and agree that any mediation, suit or other proceeding must be filed or entered into only in Boulder County, Colorado. I agree to attempt to settle any dispute (not settled by discussion) through mediation before a mutually acceptable Colorado mediator.

- I authorize TEENS, Inc. staff, representatives, contractors or other medical personnel to obtain or provide medical care for me/my child to a medical facility and to provide treatment they consider necessary for participant's health, and will pay all associated costs. I agree to the release (to or by TEENS, Inc.) of any medical records necessary for treatment, referral, billing or insurance purposes.

- TEENS, Inc. reserves the right to dismiss any participant from a trip or other activity that staff believes, in their discretion, presents a safety concern or medical risk, is disruptive, or otherwise conducts him or herself in a manner detrimental to the activity. Use of illegal drugs, tobacco products or alcohol, or disregarding rules are examples of conduct that Teens, Inc. considers detrimental, and that can lead to early dismissal. If participant is dismissed or departs for any reason, participant (and his/her family) are responsible for all costs of early departure whether for medical reasons, dismissal, personal emergencies or otherwise, including but not limited to medical evacuation costs.

- I authorize TEENS, Inc., or parties they designate, to take photos or other images, audio or video recordings and/or statements, of me/my child, without compensation, and use these materials, including for broadcast, sale, reproduction or display on the internet or via other media, in catalogues or other materials, or for any promotional, educational or other use. These materials are the sole property of TEENS, Inc.;

- this Document is effective in regard to participant's enrollment or participation in all activities from the date signed until a subsequent TEENS, Inc. Acknowledgment and Assumption of Risks & Release and Indemnity Agreement is signed by the participant and/or his or her parent, and shall remain in full force and effect for all activities completed by participant up until that point.

- this Document is intended to be interpreted and enforced to the fullest extent allowed by law. If any portion of this Document is deemed unlawful or unenforceable, it shall not affect the remaining provisions, and those remaining provisions shall continue in full force and effect.

Participant and/or parent each agree: I have carefully read, understand and voluntarily sign this Document and acknowledge that it shall be effective and legally binding upon me, my spouse, participating minor child and other children, and parent's/participant's other family members, heirs, executors, representatives, subrogors and estate. The participant 13 yrs. of age or older must sign below. If the participant is a minor (those under 18 yrs. of age), the participant's parent must also sign below.

Participant Signature (Parent print name of minor under 13 yrs. of age) /Date /Participant birthdate /Print name here

Parent or Guardian Signature /Date /Print name here

Page 3 of 3 – Please read all pages carefully and sign on page 3!
# Registration

Participants Name: ____________________________ Date of Birth: ___/___/___

Mailing Address: ____________________________

City: ____________________________ State: ____________________________ Zip: ____________________________

Cell Phone: ____________________________ E-mail: ____________________________

<table>
<thead>
<tr>
<th>Parent/Guardian 1</th>
<th>Parent/Guardian 2</th>
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<tbody>
<tr>
<td>Name:</td>
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</table>

**Emergency Contacts:** (Emergency names should be someone to whom we may release your child in the event of an illness or emergency, and neither parent/guardian can be reached.)

#1 Name: ____________________________ #2 Name: ____________________________

#1 Address: ____________________________ #2 Address: ____________________________

#1 City: ____________________________ #2 City: ____________________________

#1 Cell Phone: ____________________________ #2 Cell Phone: ____________________________

#1 Home Phone: ____________________________ #2 Home Phone: ____________________________
Once you have submitted your registration we will contact you with a confirmation of your trip and provide additional safety forms for you to complete.

On the following pages there are questions to gain some insight into your personality and why you are interested in the TEENS, Inc. Leadership Lab. If we receive a high volume of applicants there will be a selection process for registration and our groups are limited to 8 students. Please take the time to fill out the questionnaire in its entirety.

Firstly please tell us a little about yourself; how would you describe yourself and what do you like to do in your spare time?

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Our program is limited to eight participants. So please take the time to share with us why you think you will be a valuable member of our team?


Our program may have challenging moments where you are pushed outside of your comfort zone physically and emotionally. As a group you may be wet, cold, tired or hungry and have to motivate each other. How do you think you will deal with these challenges?


Anything else you would like us to know about, or any questions you would like us to answer?


Student Signature
TEENS, Inc.

Outdoor Leadership Program Tuition

Leadership Lab Pricing Scale

<table>
<thead>
<tr>
<th>Tuition</th>
<th>Number of people in your family</th>
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<td></td>
<td>2</td>
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<tr>
<td>Rate</td>
<td></td>
</tr>
<tr>
<td>$500</td>
<td>$51,201+</td>
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<tr>
<td>$350</td>
<td>$35,651-51,200</td>
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<tr>
<td>$150</td>
<td>$21,401-35,650</td>
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<tr>
<td>$60</td>
<td>$21,400 or less</td>
</tr>
</tbody>
</table>

Tuition for all our outdoor programs is on a sliding scale based on family income. Our programs are heavily subsidized by grants and are still a third of the cost of other outdoor programs for teens in Colorado. We would love to make our programs free, however to serve as many students as possible and support those that do need free programming we have to include payment in some form. Please see the tuition scale below; based on your family income and how many people in your family you will find the cost you need to pay for your teen to attend our program.

- Please include a copy of your most recent family federal tax return that shows your annual income.

We understand that your taxes do not always show your true financial situation. Please share with us information about why you may need further assistance to pay a lower amount for the program. No family will be turned away for financial reasons and there are always additional scholarships available. (Use an additional sheet if necessary). We appreciate your support of TEENS, Inc. and the youth we serve.
Important Trip Dates:

May 28th- Parent Meeting: 4pm

This is an opportunity to meet your whole group prior to being on the trip, as well as a great opportunity to ask/share any questions/concerns you may have as parents or participants.

June 7th- Gear Check: 4pm

At this time, we will make sure you have all of the items from the gear list. Items with a smiley face can be provided by TEENS, Inc.

Monday June 10th- Departure

We will meet at 9am, pack our lunches, trip coolers, trailer, and get on the road! We will arrive and set camp, then play some group games at the dunes!

Tuesday June 12th- Sand Boarding

We will start the week off with some Sand Boarding and Sand Sledding! After, we will rinse off at the Sand Dunes Pool!

Wednesday June 13th- Waterfall Hike and UFO Watchtower

We will hike to a hidden waterfall near the Sand Dunes, and take a trip to the UFO Watchtower before our night under the stars!

Thursday June 14th- Dunes Overnight

We will spend the day at the dunes, checking out the visitor center and playing in the creek. After dinner, we will pack lightly and plan to spend a night out under the stars!

Friday June 15th- Homeward Bound

We will start the morning off with breakfast and load our gear up! We will call to let you know we are headed back and our expected pick-up time. Once we arrive, we will need some time to sort and clean our group gear. As we work as a team, this task is usually accomplished within an hour to an hour and a half. We will have lunch available for participants after everything is completed!