



LONGHORN RANGERS, LTD

Inks Lake & Indian Springs

#1 Longhorn Rd., Burnet, Texas 78611

(512) 793-2811 office (512) 793-6732 fax

www.camplonghorn.com

Dear Parents,

Camp Longhorn has always placed health and safety as our #1 concern and it is everyone's desire that no mishap or illness occur while on our trip to Colorado. However, in the event an illness or injury was to happen, we need to have parent's permission for medical treatment and permission for your child to travel with us out of state. Additionally, the company which we will be using for our white water rafting trip, American Adventure Expeditions requires a Release form from parents of any minors. Please sign the Release Form below as well as the enclosed American Adventure Expeditions release form and return both to us as soon as possible.

Sincerely,
Patrick Robertson, Bobby Manning
Directors

PERMISSION TO ATTEND AND MEDICAL RELEASE

We understand and are aware that our child will be participating daily in many supervised physical activities and that the potential for accidents does exist. We understand that some of the activities which our child will be participating in include wilderness camping, white water rafting, rock climbing, and rappelling. We further understand that some of these activities are to be conducted in conjunction with or for Longhorn Rangers, Ltd., by Outpost Wilderness Adventures, LLC. American Adventure Expeditions and Blue Mountain, Inc.

We hereby give permission for our child to participate in all activities and to ride in vehicles selected by Longhorn Rangers, Ltd., and in consideration of the acceptance for our child to attend Longhorn Rangers, we hold Longhorn Rangers, Ltd., Outpost Wilderness Adventures, LLC., and Blue Mountain, Inc., their owners and operators harmless from all liability resulting from any accident or illness to our child. In the event of an emergency requiring surgery or other medical treatment, permission is given for treatment by doctors, hospitals, and/or clinics as selected by Longhorn Rangers and its' staff. A copy of this form shall be the same as the original.

Camper Name _____ Birth date _____ Age _____

Parent(s) Signature (s) _____ Date _____

_____ Date _____

In case of an emergency please contact:

Name _____ Name _____

Home Phone _____ Home Phone _____

Work Phone _____ Work Phone _____

Other Contact Information (cell phone, pagers, etc.)