



Camp Qungaayux Registration - 2022

PARTICIPANT INFORMATION			
Name:	Gender: (circle one) Male Female	DOB:	Sweater size: (circle one) Youth: L XL or Adult: S M L XL XXL
Mailing Address:	City:	State:	Zip Code:
Physical Address:	City:	State:	Zip Code:
eMail Address:	School Grade: (next year)	Attended Before: <input type="checkbox"/> Yes <input type="checkbox"/> No	Tribal Member: <input type="checkbox"/> Yes <input type="checkbox"/> No
PARENT/GUARDIAN INFORMATION			
Parent or Guardian:	Cell Phone #:	Work Phone #:	Other:
Mailing Address:	City:	State:	Zip Code:
EMERGENCY CONTACT INFORMATION			
Name: (To be used only if parent or guardian is not available)	Cell Phone #:	Work Phone #:	Other:
MEDICAL & HEALTH INFORMATION			
Does your child have medical, behavioral, physical, dietary, or other health related challenges or concerns? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain: _____ _____			
Does your child have any allergies to food or other? If yes, please list: _____ _____			
Will you be sending any medications with your child to camp? <input type="checkbox"/> Yes <input type="checkbox"/> No (all medications must be in original container) Medication: _____ Instructions: _____ _____			
Do you have family medical insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No Policy/Group #: _____ Carrier: _____ Primary Person: _____			

MEDIA RELEASE

(initial)

On occasion, the Qawalangin Tribe staff may film and/or take photos of participants enrolled in this event. Please be aware that these photos are for the Qawalangin Tribe and event contributors use (to include but not limited to: Qawalangin Tribe of Unalaska, KUCB, APIA, O.C., APICDA, Alaska Community Foundation, Aleut Foundation, Aleut Corporation, Aleutian Housing Association, APIA Federally Recognized Tribes, Museum of the Aleutians and may be used in pamphlets, flyers, brochures, digital stories and/or on websites or Facebook. By signing below, I grant my permission, the right to incorporate my and/or my child's (children's) photograph and/or personal experience and/or video footage taken as a result of participating (alone or together with other materials), in whole or in part in the activity/activities.

CODE OF CONDUCT – Student and Parent must sign acknowledgment

Participants of all ages agree to adhere to the following code of conduct. Violations of the code of conduct is strictly prohibited and will not be tolerated. Violations include:

- Bullying or taking unfair advantage of another participant, mentor or volunteer.
- Conducting yourself in a manner that is unsafe or endangers the life, safety, or health and well-being of others.
- Failing to follow rules or cooperate with adult supervision.
- Verbally, physically, or visually harassing another or directing abusive language, discourteous or rude behavior, or threats or actual violence towards a staff member, volunteer, mentor or another participant or group.
- Bringing onto the event venue dangerous or unauthorized materials such explosives, firearms, weapons or other similar items.
- Possession or use of alcoholic beverages or illegal drugs on the event venue or reporting to the program while under the influence of drugs or alcohol.

_____ I have read the Qawalangin Tribe's Code of Conduct. I agree to abide by the rules described above and understand that I may be removed from the program if I violate any of these rules.

(Student Initial)

_____ I have read the Qawalangin Tribe's Code of Conduct. I agree to abide by the rules described above and understand that I may be removed from the program if I violate any of these rules.

(Parent Initial)

CONSENT AND AUTHORIZATION

_____ My child is allowed to participate in all camp activities. If not, please check the box next to the activity that ***is not*** permitted. An alternate activity will be offered.

(Initial)

- | | | |
|----------------------------------------------------|---------------------------------------------------|-------------------------------------------------------------------------|
| <input type="checkbox"/> Plant & Salve Making | <input type="checkbox"/> Intertidal Studies | <input type="checkbox"/> Archeology |
| <input type="checkbox"/> Head dressing | <input type="checkbox"/> Bentwood Hats | <input type="checkbox"/> Weaving |
| <input type="checkbox"/> Skin & Gut Sewing | <input type="checkbox"/> Unangan Tunuu Language | <input type="checkbox"/> Song and Dance |
| <input type="checkbox"/> Atl Atl (Spear Throwing) | <input type="checkbox"/> Traditional Food Cooking | <input type="checkbox"/> Hunting/Fishing (Preserve & prepare fish only) |
| <input type="checkbox"/> Nigilax Build (Open Boat) | <input type="checkbox"/> Breaking Waves Course | <input type="checkbox"/> Native Youth Olympics (NYO) |

_____ **Registering for the Breaking Waves program at the Camp Qungaayux, offered by APIA and staff. The program goal is to give youth the skills they need to navigate their life's journey safely without being pulled off course by alcohol and drugs.** This is done by helping them become more involved with their tribal culture, traditions, and values, which we believe can help prevent substance use and help them cope effectively with other life challenges. One of the areas that is involved in the program is to help youth deal with negative emotions like stress, anxiety, and depression. An important topic in dealing with depression is the possibility of suicide. Because of this, the program has a number of sessions that focus on coping with negative emotions, recognizing the signs of potential suicidal thoughts, intentions, or plans in oneself or in others like friends or family, and what to do if you see someone struggling with the idea of taking their own life. These are very sensitive and sometimes difficult topics to discuss.

(Initial)

GENERAL WAIVER OF LIABILITY & Waiver of Liability Related to COVID-19 or another Communicable Disease

_____ **Please read this form carefully and be aware that in signing this form and participating in this activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you and/or your child/ward might sustain as the result of participating in any and all activities connected and associated with this activity.** I recognize and acknowledge that there are certain risks of physical injury to participants in this activity, and I voluntarily agree to assume the full risk of any injuries, damages or loss, regardless of severity, that my child/ward and/or I may sustain as a result of participating in this activity. I further agree to waive and relinquish all claims that I and/or my child/ward and/or any related third party may have (or accrue to me and/or my child/ward) as a result of participating in this activity against the Qawalangin Tribe its officers, agents, directors, volunteers, and employees (hereinafter collectively referred to as "Parties".)

(Initial)

(Initial)

The Coronavirus has been declared a worldwide pandemic by the World Health Organization. COVID-19 is reported to be extremely contagious with the capacity to transmit from person-to-person through respiratory droplets and/or by contact with contaminated surfaces and objects. **The Qawalangin Tribe of Unalaska follow all recommended guidelines for limiting the transmission of COVID-19 as set forth by the City of Unalaska, State of Alaska and CDC. The Qawalangin Tribe will implement and strictly enforce these guidelines among the attendees, Mentors, Staff and Volunteers during the camp. Even with these measures, it is not possible to completely prevent the presence of the disease. The Qawalangin Tribe cannot guarantee that you will not become exposed to or contract COVID-19, or another communicable disease while participating in Camp Qungaayux. Attending the event could increase your risk and your child(ren)'s risk of contracting COVID-19, or another communicable disease.**

(Initial)

Please Initial the following:

By Registering for Camp Qungaayux on behalf of yourself or your minor child(ren), you acknowledge that by choosing to attend the Qawalangin Tribe of Unalaska's - Camp Qungaayux may be exposing yourself, or your minor child(ren), to and/or increasing your risk of contracting COVID-19 or another communicable disease. And in order to take all precautions for yourself and others, you attest that:

- In the last 14 days leading up to the event, you have not experienced any of the following symptoms: cough, shortness of breath or difficulty breathing, fever, chills, body aches for unknown reasons, sore throat, or new loss of taste or smell.
- You have not traveled internationally within 14 days prior to the event date.
- You do not believe you have been exposed to someone with a suspected and/or confirmed case of COVID-19 within the last 14 days prior to the event.
- You have not been diagnosed with COVID-19 and not yet cleared as non-contagious by state or local public health authorities with 14 days prior to the event date.
- You are following all CDC recommended guidelines and limiting your exposure to COVID-19 or another communicable disease.

On my behalf and/or on behalf of my child(ren), I hereby release and discharge the Qawalangin Tribe of Unalaska, its officers, directors, managers, officials, trustees, agents, employee, Mentors, volunteers, and other representatives from all liabilities, claims, demands, and causes of action in connection with exposure, infection, or spread of COVID-19, or another communicable disease that may be incurred in connection with my and/or my child(ren)'s attendance at Camp Qungaayux. I understand that this waiver means I give up my right to bring any claims including for personal injury, disease, death, or any other loss, including but not limited to claims of negligence of the Qawalangin Tribe of Unalaska, its officers, directors, managers, officials, trustees, agents, employees, Mentors, volunteers, and other representatives, whether a COVID-19 infection occurs before, during, or after participation in any Camp Qungaayux event.

In signing this Waiver to Participate form, I acknowledge and represent that I have read and fully understand the above important information, warning of risk, waiver and release of all claims and assumption of risk. I further covenant and agree that for the considerations state above my child, any related third party, and/or I will not sue the Qawalangin Tribe of Unalaska and affiliates, its members individually, its officers, agents, employees, Mentors, and volunteers for any claim for damages arising or growing out of my child's and/or my participation in above said activities. Further, I understand that this assent and Consent to Participate and covenant not to sue shall be effective during the entire period of my enrollment at the institution or participation in risk related activity.

By signing below, I do hereby fully release and forever discharge the Parties from any and all claims for injuries, damages, or losses that my child/ward and/or I may have or which may accrue to me and/or my child/ward and arising out of, connected with, or in any way associated with this activity.

PARTICIPATION WILL BE DENIED If waiver is not on file or if the signature of the adult participant or the signature of the parent/guardian of a minor participant and the date are not on this waiver.

Print Participant Name	Signature & Date
Print Guardian Name	Signature & Date
Print Witness Name	Signature & Date
OFFICE USE ONLY	
Print QT Camp Supervisor Name	Signature & Date
Print QT Administrator Member Name & Title	Signature & Date