

Dear Senior Parents/Guardians:

Each spring, Rumsey Hall's graduating class shares some special time off campus in a relaxed, fun, supervised atmosphere before Commencement. This year, the Class of 2025 will spend two days at Camp Hi-Rock in Mt. Washington, MA for their Senior Trip.

Camp Hi-Rock is nestled in the Berkshire Mountains near Great Barrington, MA. The Seniors will stay in waterfront lodges and enjoy campfires and organized games in the evening. During the day, students will have the opportunity to canoe and sail on the lake, try the high ropes course with certified instructors, and enjoy a range of activities.

Seniors and supervising faculty members will depart at 8 a.m. Thursday, May 15 and return at 8:00 p.m. on Friday, May 16. The all-inclusive cost of the trip is \$220. We are hoping that all Seniors will share in this tradition since it will be one of their last opportunities to be together as a group.

By signing below you will be granting consent for your student to attend this year's Senior Trip. Regardless of the circumstances which may give rise to any injury, I agree that I will not sue RUMSEY but instead hereby release, waive and discharge RUMSEY, its board, officers, administrators, teachers, coaches, employees, and agents, all of which are hereinafter referred to as "Releases", from demand or claim of any losses or damages caused or alleged to be caused in whole or in part by the Releases. I hereby hold harmless, release, and forever discharge the release from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

For our planning, your prompt response is appreciated.

- Please submit \$220 payable to Rumsey Hall (Attn: Senior Trip)
- Sign this permission to participate below
- Complete and sign the following attached Camp Hi-Rock release forms

It is important to the Rumsey Hall community that all Seniors have the opportunity to participate in this event. If you are in need of financial assistance, please fill out the following [form](#) by Friday, April 9th to discuss options that may be available to you.

Signature: _____

Thank you,

Rick Butler P '20, '23
Director of Residential Life

COMPLETE SECOND PAGE FROM YMCA CAMP HI ROCK

YMCA CAMP HI-ROCK 544 East St. Washington, MA 01258
P 413 528 1227 E info@camphirock.org W www.camphirock.org

PARTICIPANT INFORMATION, MEDICAL CARE AUTHORIZATION, INFORMED CONSENT AND LIABILITY RELEASE

Participant Name: _____ Date of Birth: _____
Address: _____ Home Phone: _____
Parent/Guardian (for minors): _____ Email: _____
Parent phone: _____ Parent alternate phone: _____

Emergency Contact Information

In case of emergency while I (my child) is at YMCA Camp Hi-Rock, please contact the following if I can't be reached:

Name: _____ Phone: _____
Alternate phone numbers: _____ Relationship to camper: _____

Medical Insurance Information (In Case of Emergency)

Medical Insurance Policy Number: _____ Insurance Company: _____
Name of Policy Holder: _____

Participant Health History Survey

Dietary concerns/restrictions: Please list any dietary needs (include allergies, vegetarian, vegan, gluten free etc.):

Does the participant have high blood pressure? ☐ yes ☐ no

Does the participant have any allergies (other than food allergies listed above)?

Is the camper taking any medications? ☐ yes ☐ no If yes, please list below:

Does the camper have any pre-existing injuries? ☐ yes ☐ no If yes, please list below:

Does the camper have any health conditions? ☐ yes ☐ no If yes, please list below:

Does the camper have any other physical limitations? ☐ yes ☐ no If yes, please list below:

Has your doctor limited the camper's activities in any way? ☐ yes ☐ no If yes, please list below:

Please list any other health history/problems about which you feel YMCA Camp Hi-Rock staff or medical staff who may treat the camper while at Camp Hi-Rock may need to be aware:

FOR PARTICIPANTS ATTENDING HI-ROCK WITH A GROUP

Name of Group Leader: Rick Butler - Rumsey Hall School
First Name Last Name

FOR ALL PARTICIPANTS

I have read and understand the camp rules included below. I have had sufficient opportunity to read this document, have read and understand its meaning, and agree to be bound by its terms. I have answered the above questions accurately and completely. **Student will sign at school**

Signature of Participant: _____ Date: _____

FOR PARTICIPANTS 17 AND UNDER

I will ensure my child is aware of and will comply with these rules. I accept responsibility for my child's behavior.

Signature of Parent/Guardian: _____ Date: _____

THIS FORM MUST BE SUBMITTED TO YMCA CAMP HI-ROCK PRIOR TO ALL CAMP HI-ROCK ACTIVITIES.