



Laredo College

Camp Participant Reference Guide

This manual is designed for each parent/guardian to assure you have, and we have, all the necessary information to ensure Camps at Laredo College are successful for all individuals involved. Included in this manual are some important policies, procedures, and forms for you to review and some to return to us.

revised 3-18-26

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Welcome

We are extremely excited for the start of our Laredo College Camps program. Thank you for registering your camper with us! We look forward to being a part of your educational journey.

At our Camps we are committed to giving campers a diverse learning experience. Our camper to staff ratio during our themed activities will be at maximum 10:1.

Please take the time to read through this reference guide. It contains important information to assure a successful camp for all parties involved.

Camp Mission and Philosophy

Laredo College provides opportunities to thrive through innovative staff, facilities, and programming.

Camps are designed to foster a child's sense of autonomy while exploring all forms of learning. In doing so, we hope to foster a lifelong love for learning in the youth of our community.

Camp Contacts

Camp Director/Staff will provide specific contact information at camp orientation.

For general information/questions:

Office of the Vice President of Student Success & Compliance: 956.764.5955

Camp Email: lccamps@laredo.edu

Check-in & Check-out Procedure:

Check-In:

Check in process will be explained by camp director/staff at orientation

Pick-Up/Drop-Off Locations:

Locations will be identified by camp director/staff at orientation

Pickup/Check-out:

Pickup Time: Departure time will be provided by camp director/staff at orientation

Check-out: The individual picking each camper up will be expected to follow the same procedures as explained by camp director/staff at orientation. Campers will only be allowed to leave with an individual authorized by a parent/guardian listed on *Authorization for Additional People to Pick Child Up* section of the Emergency Contact Form.

Pickup details – Outside of designated camp pickup times

If you need to pick your child up outside of regular camp pickup time, please let the camp director/staff member know at check-in what time you will be picking the camper up.

What to Bring to Camp

Below you will find a recommended list of items campers should bring each day.

Items to bring	Items to Leave at Home
<ul style="list-style-type: none">• Comfortable clothing	<ul style="list-style-type: none">• Personal toys and gadgets
<ul style="list-style-type: none">• Athletic footwear – Please no sandals	<ul style="list-style-type: none">• Cell phones
<ul style="list-style-type: none">• Jacket and/or sweatshirt	<ul style="list-style-type: none">• Electronic Devices

COVID-19 Precautionary measures

In its commitment to safety and health, Laredo College Camp staff will follow COVID 19 precautionary measures outlined below. If you have any questions or concerns, please feel free to visit/call Camp Director/Staff.

- Our camp staff will be trained on proper cleaning/disinfecting techniques. After each use and after each day, all common areas will be thoroughly cleaned by our staff. If there is a planned activity that groups will rotate through, we will have our staff ensure that area is cleaned properly before the next group arrives.
- Campers will not be required to wear a mask.
- Any child exhibiting symptoms consistent with that of COVID-19 and experiencing a fever will be sent home.
- We will provide hand sanitizer near all activities.

These procedures are subject to change based on CDC, State, and County requirements and guidelines.

Required Camp Participant Forms

We ask that you fill out and sign forms listed below.

Camp Participant Application
Camp Student Rules
Camper Medical Information and Release Form
Accident Waiver and Release Form
Emergency Contact
Cancellation, Payment, Refund Policy Form
Photography, Video, and Sound Recording Release

Please return completed forms via e-mail to lccamps@laredo.edu by: 5:00pm on the Thursday before the first session your child is attending.

Forms are available in electronic format. If you would like to fill these out electronically, please advise department so that these can be e-mailed to you.



LAREDO COLLEGE

CAMP PARTICIPANT APPLICATION

Camp Name: _____

Date(s): _____ **Time(s):** _____

PARTICIPANT INFORMATION

Camper name: _____

Address: _____

Date of Birth: _____

Gender: Male Female

Parent/Legal Guardian name: _____

Email: _____

Cell/Home phone: _____

Work phone: _____

Parent/Legal Guardian name: _____

Email: _____

Cell/Home phone: _____

Work phone: _____

Street Address: _____

City: _____

State: _____

Zip: _____



Camper Medical Information and Release Form

Name: _____
Address: _____
Phone: _____
Date of Birth: _____
Description of Activity or Trip: _____
Location: _____
Date(s): _____

Emergency Contact

Name: _____
Address: _____
Phone: _____

Medical Information

Physician Name _____
Address: _____
Phone: _____
Health Insurance Carrier: _____
Group #: _____ Policy #: _____
Current Medication (if none, put N/A): _____
Allergies (if none, put N/A): _____
Special Health Needs or Concerns: _____

Emergency Medical Authorization

I, the undersigned, do hereby authorize Laredo College and its designated representatives to consent, on my behalf, to any medical/hospital care or treatment to be rendered upon the advice of any licensed physician. I agree to be responsible for all necessary charges incurred by any hospitalization or treatment rendered to this authorization. This authorization is effective through the dates listed above.

I am eighteen years of age or older, have read the above authorization, and confirm that the information contained therein is true and accurate.

Student Signature: _____ Date: _____

For travelers under the age of eighteen

I am the undersigned parent/guardian, have read the above authorization, and confirm that the information contained therein is true and accurate.

Parent/Guardian Signature: _____ Date: _____



Accident Waiver and Release of Liability Form

This form must be completed by individuals participating in a Laredo College-sponsored and co-sponsored activity/events. Please read the form below carefully. If you have any questions, please contact the Office of the Vice President of Student Success & Compliance.

Activity/Event

Terms of Agreement

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity or event in which I may participate, and that it will govern my actions and responsibilities at said activity or event.

WAIVER

In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

I hereby waive, release, and discharge LAREDO COLLEGE by and through this WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT – ON/OFF CAMPUS ACTIVITIES their trustees, officers, employees, agents, successors, representatives, and volunteers from any and all liability, including but not limited to, liability for all claims, demands, actions, causes of action, judgments, damages, expenses, and costs (including attorney’s fees) arising from the negligence, gross negligence, carelessness, or fault of the entities or persons released, resulting in death, disability, personal injury, property damage, property theft, mental anguish, or actions of any kind which arise out of, result from, occur during, or are connected in any manner, with my participation in the Activity/Event, including my traveling to and from this Activity/Event.

I certify that I am physically fit, have sufficiently prepared or trained for participation in the activity or event, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in this activity or event.

_____Initials

INDEMNIFICATION AND HOLD HARMLESS

I also agree to INDEMNIFY AND HOLD HARMLESS LAREDO COLLEGE and their trustees, officers, employees, and agents from all claims, **including claims for gross negligence, negligence, or carelessness**, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorney’s fees which arise out of, result from, occur during, or are connected in any manner with my participation in the Activity/Event, and promise not to sue the entities or persons mentioned in this paragraph for any and all liabilities or claims made as a result of my participation in this Activity/Event.

_____Initials

ASSUMPTION OF RISK

I acknowledge that this Activity/Event may involve a test of a person's physical and mental limits and may carry with it the potential for death, serious injury, and property loss. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to participants but are also present for volunteers.

I hereby assume all of the risks of participating and/or volunteering in all Laredo College related field trips, travel off campus, organizational activities or all other campus related events, including by way of example and not limitation, any risks that may arise from negligence, gross negligence, or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

_____Initials

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity or event. I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers, and assigns.

_____Initials

SEVERABILITY

I, the undersigned, further expressly agree that the foregoing waiver and assumption of risk agreement is intended to be as broad and inclusive as is permitted by the Laws of the State of Texas and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

_____Initials

ACKNOWLEDGMENT AND UNDERSTANDING

I have read this **WAIVER OF LIABILITY, ASSUMPTION OF RISK, and INDEMNITY AGREEMENT**, fully understand its terms, and understand that I am giving up my rights, including my right to sue. I acknowledge that I am signing this document freely and voluntarily, and intend by my signature to be a complete and unconditional release of liability to the greatest extent allowed by law.

_____Initials

Participant

Name: _____
Palomino ID: _____
Phone Number: _____

Emergency Contact

Name: _____
Address: _____
Phone Number: _____

Relationship: _____

Signature: _____
Date: _____

Parent / Guardian Waiver for Minors (Under 18 years old)

The undersigned parent or guardian does hereby represent that he/she is, in fact, acting in such capacity, has consented to his/her child or ward's participation in the activity or event, and has agreed individually and on behalf of the child or ward, to the terms of the waiver of liability, assumption of risk, and indemnity agreement set forth above. The undersigned parent or guardian further agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim, or damage whatsoever which may be imposed upon said parties as a result of death, disability, personal injury, mental anguish, property damage, property theft, or other injury or damage sustained by my child/ward arising out of acts of negligence, gross negligence, or carelessness.

Signature: _____
Parent/Guardian Name: _____
Date: _____



Laredo College Camp Emergency Contact Information

Please list the name of the individual(s) you wish to be contacted in an emergency situation when the parent or guardian listed on your registration form is unable to be reached.

CONTACT 1

In Case of an Emergency, please contact: _____

Relationship to camper: _____

Primary Phone: _____ Secondary Phone: _____

CONTACT 2

In Case of an Emergency, please contact: _____

Relationship to the camper: _____

Primary Phone: _____ Secondary Phone: _____

Authorization for Additional individuals to Pick Child Up

In order to assure the safety of your child, please provide the program with a list of names of individuals that you approve to pick up your child in case of an emergency and/or if you are not able to pick up your child yourself.

Name	Relation	Phone
1.		
2.		
3.		
4.		
5.		

A government-issued picture ID will be required to pick up campers.

I, _____, as the Parent/Legal Guardian of _____, hereby authorize the Laredo College Camp staff to release my child to the above listed persons and release Laredo College Camp staff from any liability that may arise by them releasing my child to them. I fully understand that once my child is released to any of the above individuals, it will be their responsibility and not the programs to ensure their safety and well-being.

*Note: If you have special concerns or circumstances about picking up your child please discuss them with the camp director.

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: Date _____ **Date:** _____

Camper Conduct Agreement

Laredo College reserves the right to dismiss a camper if their behavior jeopardizes their safety or another camper's safety and well-being. In these situations, guardians will be called immediately. For minor issues regarding camper conduct, guardians will be notified in person or by email.

Signature: _____ Date: _

(Parent or Legal Guardian)

Cancellation Policy

Laredo College reserves the right to cancel any session or modify activities due to enrollment numbers, facility problems, staff concerns, or circumstances beyond its control. Guardians will be notified immediately if a session is altered in any way.

Payment and Refunds

Payment is due in full upon registration. Refunds will be given at 50% of paid session price, if requested by the Thursday before the session starts.

I have read and understand the Cancellation, Payment, and Refund Policies:

Parent/Legal Guardian Signature: _____ Date: _



Laredo College Summer Camp *Publicity Consent and Release Form*

I, _____, hereby give Laredo College permission and informed consent to use my photography, my image, voice, videotape and/or audio tape for College promotion and publicity purposes.

I fully understand that any photos, video and/or audio may be published, broadcast, or otherwise reproduced for College publicity purposes, and that LC will use same in a responsible, ethical manner.

I certify that I am at least 18 years old, have read and fully understand the above statement, as evidence by my signature.

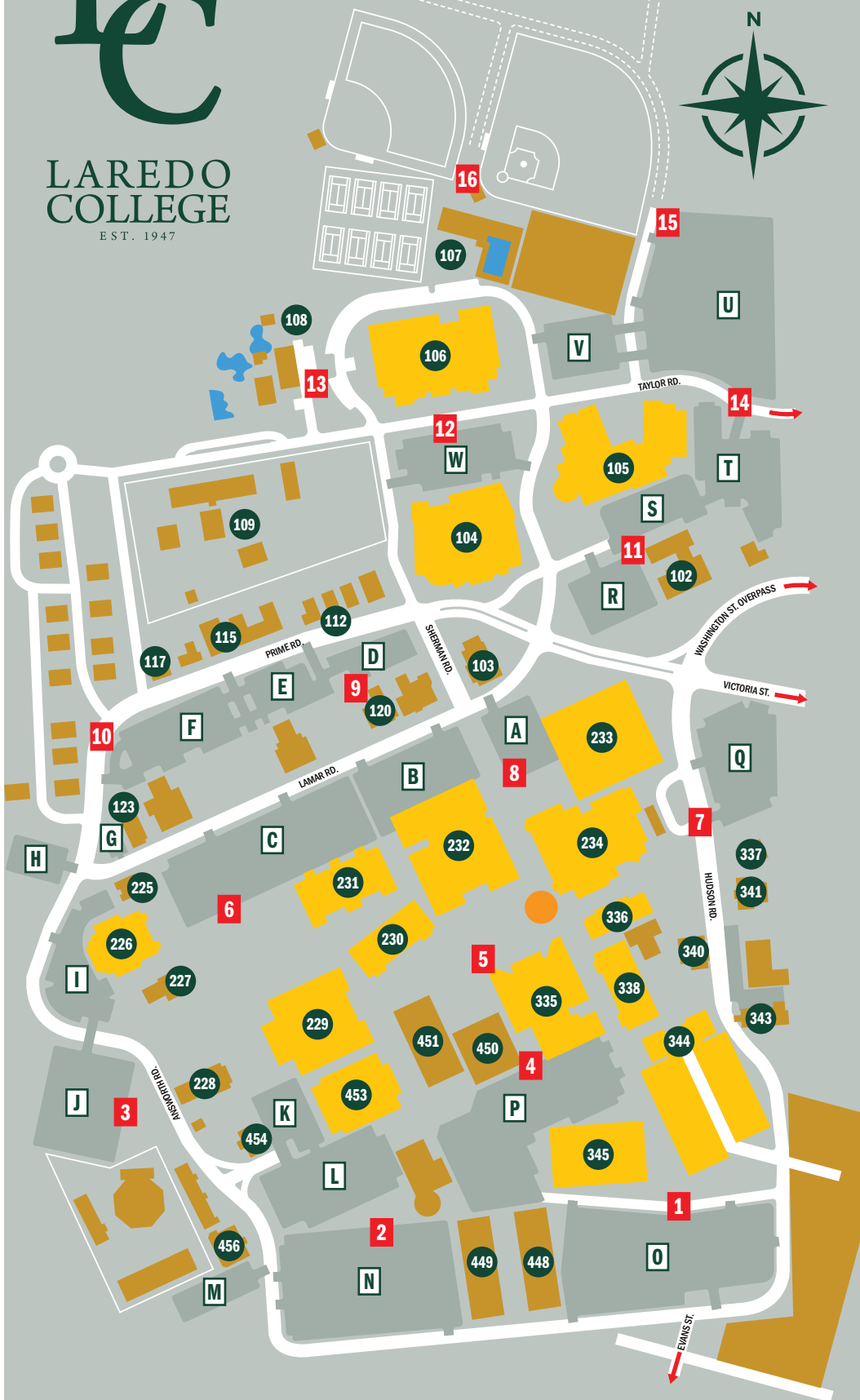
Signature _____ Date _____

If the participant is under 18 years old, I am signing as the parent or legal guardian and have read and fully understand the above statement as evidence by my signature.

Parent/Legal Guardian Name (Print) _____

Parent/Legal Guardian Signature _____ Date _____

Fort McIntosh Campus Map



Zone A	Building
102	Imaginarium
103	Institutional Advancement
104	Guadalupe & Lilia Martinez Fine Arts Center MFA
105	Visual and Performing Arts Center VPA
106	Lewis Energy Group Academic Center LEAC
107	Fort McIntosh Park Sports & Recreation Center
108	Lamar Bruni Vergara Environmental Science Center LBVESC
109	U.S. Army Reserve
112	Payroll Office
115	Texas Department of Public Safety
117	HVAC Training Center
120	Purchasing
123	ALFA
Zone B	
225	LLUSCBA Offices
226	De La Garza Building DG
227	Commander's House
228	Pvt. David B. Berkeley Cantu Chapel
229	Maravillo Gym MG
230	Laird Hall LH
231	Memorial Hall MH
232	Yeary Library YL
233	Lerma Peña Building LP
234	Cigarroa Science Complex CSC
Zone C	
335	Kazen Student Center KC
336	Arechiga Hall AH
337	Campus Police CP
338	Adkins Building AK
340	ETAC - Human Resources
341	Human Resources
343	Small Theater (LTGI)
344	Moore Vocational Tech Center MV
345	D.D. Hachar Vocational Building HV
Zone D	
448	Lopez Nursing Building P-1
449	Ruben M. Garcia Allied Health Center . . P-2
450	Elpha Lee West Building (Administration) WB
451	Martin Building MB
453	Eloy Garcia Sr. Building EG
454	Veteran's Center
456	Print Services/Print Shop

- A Parking Lots
- Exit Routes
- Academic
- Institutional
- Emergency Phones
- Designated Public Forum Area



South Campus Map

- 501 - College of Health Sciences
- 502 - Gateway Community Health Center
- 503 - Academic and Advanced Technology Center
- 504 - Camilo Prada Child Development Center
- 505 - Raquel González Automotive Technology Center
- 506 - Commercial License Driving pad

- 607 - Intramurals/Kinesiology Complex
- 608 - Congressman Henry Cuellar Protective Services Center
- 609 - J.C. Treviño Fitness Center
- 610 - William N. "Billy" Hall, Jr. Student Center
- 611 - Senator Judith Zaffirini Library

- A Parking Lots
- Exit Routes
- Academic Buildings
- ☎ Emergency Phones
- Designated Public Forum Area