

# Rules for Minors attending WUULF

1. No weapons, violence, or destructive behavior.
2. No use or possession of alcohol or drugs.
3. No smoking.
4. Parents/Guardians will be responsible for property damage done by individual teens or youth.
5. Parents/Guardians will establish communication with Teen or Youth Staff for activities on or off campus.
6. Parents/Guardians and Teen/Youth acknowledge that Ghost Ranch and Camp Quiet Time/Curfew is 10:00 pm. All activity after this hour must be respectful of Quiet time and chaperoned with a 1:5 ratio as arranged by the Parents/Guardians.
7. Parents/Guardians will establish ground rules and curfews with their teens, or youth during non-program time. Teen and Youth Staff are only responsible for those teens or youth who attend scheduled programming during program hours.
8. Parents/Guardians will be responsible for Teen or Youth during all non-program hours.
9. No sexual activity, defined as intercourse or heavy petting will be permitted.

**I understand that a violation of these rules could result in my immediate removal from scheduled activities and possibly from Ghost Ranch itself.**

I, (Teen or Youth) \_\_\_\_\_ Age \_\_\_\_\_

I, (Teen or Youth) \_\_\_\_\_ Age \_\_\_\_\_

I (Parent/Guardian) \_\_\_\_\_ understand that if my child or I fail to comply with any of these rules, it could result in the removal of my child from scheduled activities or I could be asked to take my child home.

## Youth / Teen Permission Form

Parent: \_\_\_\_\_

I do hereby give permission for my child/children listed below to participate in all WUULF activities both on and off site and release WUULF from any liability associated with these activities. It is understood that my child/children will either participate in the WUULF programs or be under my care, supervision, and responsibility. I have provided medical information regarding allergies, medicine, and special considerations for each child if applicable.

1. \_\_\_\_\_ Age \_\_\_\_\_

2. \_\_\_\_\_ Age \_\_\_\_\_

3. \_\_\_\_\_ Age \_\_\_\_\_

4. \_\_\_\_\_ Age \_\_\_\_\_

## Guardianship Form

*For children not your own and under the age of 18. If you bring children not your own to WUULF, you must provide proof of guardianship. You may not be responsible for more than three youth/teens other than your own.*

Parent/Legal Guardian: \_\_\_\_\_ I do hereby authorize  
\_\_\_\_\_ To act as guardian and to give permission for medical or emergency  
treatment as needed while my child/children are at WUULF.

1. \_\_\_\_\_ Age \_\_\_\_\_

2. \_\_\_\_\_ Age \_\_\_\_\_

Signed: \_\_\_\_\_

Notarized by \_\_\_\_\_ on this day \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

**Return this form with your WUULF registration form if necessary**