

Clark County Parks & Recreation Department

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**Clark County Parks & Recreation Department and the Camp Lee Team
Thank you for joining the 2026 Summer Camp Season!**

We appreciate your camper and you in assisting our team to create a fun, safe and exceptional camp environment. Where all children may enjoy the “CAMP EXPERIENCE”! To have a great “Camp Experience” means to agree and follow all policies, dress code, and respect your fellow campers and staff.

Campers and Parent/Guardian must sign the Registration Form prior to attending Camp.

*****Drop off & pick up will now take place at Camp Lee Canyon. See packet for required times.**

Thank you and Welcome to Camp Lee!



Clark County Parks & Recreation 2026 Camp Lee Canyon Resident Camps Registration Form

Registration Period: February 17 – June 26, 2026



Echo Camp: July 12 - July 15

Ages: 10 – 13 Fee: \$450

PARTICIPANT INFORMATION (Please print clearly)

NAME: _____ GENDER: _____ AGE (at time of camp): _____ BIRTH DATE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

T-Shirt size:

ADULT SMALL

ADULT MEDIUM

ADULT LARGE

ADULT X-

LARGE ADULT XXL

ROOMMATE REQUEST: (We no longer accept roommate requests**)**

PARENT/GUARDIAN INFORMATION

PARENT / GUARDIAN: _____ PHONE: CELL _____ HOME: _____ WORK: _____

E-MAIL: _____

PARENT / GUARDIAN: _____ PHONE: CELL _____ HOME: _____ WORK: _____

E-MAIL: _____

EMERGENCY CONTACT/AUTHORIZED PICK UP (TO BE ALLOWED TO TRANSPORT CHILD IF PARENT/GUARDIAN IS NOT AVAILABLE)

NAME: _____ RELATIONSHIP: _____ CELL: _____ HOME: _____ WORK: _____

NAME: _____ RELATIONSHIP: _____ CELL: _____ HOME: _____ WORK: _____

WAIVER SECTION

I, _____, acting on behalf of myself or my minor child, do expressly and forever waive and release
(Print Parent/Guardian Name above)

Clark County, Nevada, Clark County Department of Parks and Recreation and all of their respective officers, employees, agents or representatives from any and all liability for personal injuries or damages sustained, incurred or arising from participation in any of the Clark County Department of Parks and Recreation sponsored Lee Canyon Resident Camps.

Parent or Legal Guardian Signature: _____ Date: _____

CAMPER POLICIES: I and my minor child have read and agree to adhere to the Camper policies and dress code (Please see Policies form attached).

Parent /Legal Guardian Signature: _____ Child/Camper Signature: _____

PHOTO RELEASE: I understand that photos may be taken of my child at camp that may be published and used for advertising/promotional use by the Clark County Parks & Recreation Dept. and its agents. I relinquish the right to protest any such use or receive compensation of any type.

Parent or Legal Guardian Signature: _____

MOVIE WAIVER: I authorize my child to watch a PG rated movie.

Parent or Legal Guardian Signature: _____

Do Not Write Below - For Clark County Use Only

Person Picking up child: _____ Signature of person Picking up child: _____
(Print Name)

Signature of camp staff releasing child: _____ Date _____ Time: _____

ECHO CAMP:

July 12 – July 15 (Ages 10-13)

Are you ready for a brand-new exciting experience of discovery and adventure. Echo will offer a variety of activities such as challenge courses, rock wall, mtn biking, hiking, archery, art, tie dye, and games!

NEW! Transportation to and from Camp Lee

Drop Off:

Sunday July 12th between 1:30 p.m. and 3:40 p.m. Girl parents must leave camp by 2:30pm no exceptions. Boy parents must leave camp by 3:40pm no exceptions.

Girls Drop Off: 1:30pm - 2:30pm. Do not arrive early.

Boys Drop Off: 2:40pm - 3:40pm. Do not arrive early as parking is limited.

Bring your child and all camping gear to Camp Lee Canyon. **6201 Lee Canyon Rd, 89124.**

- Camp Directors and Staff Leaders will be on sight to meet with you and confirm paperwork is correct and complete and answer questions. Parents will park in the dirt parking lot and walk to check in.
- A photo of your camper will be taken, and your camper will make their name tag.
- If your child is prescribed medication, you along with your child must meet with the Nurse. At this time, you will fill out the medication form and hand the medication to the Nurse. The Nurse will only accept medication in the prescribed form in the prescribe bottle. Please, only send dosage for 4 days.
- **No “Over the Counter” medication will be accepted.**
- **Please have lunch before arriving at camp as campers will not eat at camp until dinner at 6:30pm.**

Please note: **We are asking minimal people to attend the Drop-Off process. No Pets in camp.**

Pick Up:

Wednesday, July 15th between 3:30 p.m. and 5:30 p.m.

- Parents you may pick up your camper from Camp Lee Canyon. **6201 Lee Canyon Rd, 89124.**
- **Pick- up must be NO later than 5:30 p.m.**
- **Note: A Photo ID is required to release your camper!**

2026 Resident Camp Registration Information

- Echo Camp for ages 10-13 runs from July 12 – July 15
- The Camp fee is \$450 per child.
- ***Refunds: (100% if 30 days prior to start of camp) (75% if cancelled 21-29 days from start) (50% if cancelled 14-20 before start) (0% if cancelled less than 14 to the start of camp).**
- *Camp Spaces are limited and fill up quickly. Registration will be taken on a first come-first served basis. (Once camps are full, we will add your child to a waiting list; you will be contacted if a space becomes available.)*
- **Please register by Internet:** To register by Internet: go to <https://tinyurl.com/yck5thps>
If you have registered for any other Clark County programs, you may have to contact 702-455-1905 to get your username. At the end of the registration, it will give you a packet to complete. Please sign and return your child's Camp Registration Form along with all additional required forms by (June 26th) Please send your registration packets to:
prmtcrestreservations@clarkcountynv.gov
prsunsetfrontdesk@clarkcountynv.gov
- **Mountain Crest Neighborhood Services Center, 4701 N. Durango Rd. Las Vegas, NV 89129**
Hours of Operation: Monday-Friday: 9am-5pm
- **Sunset Park Administration Offices, 2601 E. Sunset Rd. Las Vegas, NV 89120**
Hours of Operation: Monday-Thursday 7:30am-5:30pm
- **Payment Information:**
Your total balance must be paid in full by (June 26th)
Make checks payable to: Clark County Parks & Recreation.
Mailing Address: Clark County Parks & Recreation
Attn: Resident Camps
4701 N. Durango Rd.
Las Vegas NV 89129

Clark County Parks & Recreation

RESIDENT CAMPER POLICIES

Policies:

- Participants must be respectful to staff and other campers.
- Destruction and/or defacing the property of Camp Lee, Camp Lee Staff, Camp Participants and Partnering Agencies/ Individuals are prohibited.
- Bullying and Hazing are not tolerated.
- Parents are asked not to call children at camp except in case of an emergency. Campers are not allowed to call home or friends, etc. If your child is ill or unhappy, parents will be contacted.
- Absolutely no alcohol or drugs allowed in camp.
- Smoking and illegal drug use prohibited.
- Fireworks, lighters, or matches are not allowed in camp.
- Weapons including but not limited to knives, b-b guns, boomerangs, etc. are not allowed in camp.
- Gum, candy, and snacks are not allowed in the cabins. Do not send these items with the camper.
- RX Medications must be turned in to the nurse at check-in. "Over the Counter" medications not allowed at camp,
- If the camp nurse determines that a camper's acute health status warrants further medical attention or observation, the parent/guardian/emergency contact must pick up the camper within 2 hours of notification.

Dress Code:

- Spiked jewelry, wallet chains, chain belts, and gang identifying clothing are prohibited.
- Strapless, low-cut, bare midriff/see-through shirts will not be allowed. Shirts extend below belt level.
- Undergarments should not be exposed.
- Shorts should be fingertip length or longer.
- Skirts/dresses are only allowed for the Teen Dance and must be fingertip length or longer.
- Participant clothing may not have printed statements or pictures that are vulgar, obscene, related to sex, the use of drugs, alcohol, tobacco products or promote hate or violence.
- Shoes should be closed toed, sturdy, comfortable and appropriate for hiking.

Discipline Guidelines:

If a camper is not following the camp policies and or dress code, a four-step disciplinary process will be utilized*.

- **First offense:** Counselor will meet with the camper to explain the problem and suggest appropriate ways to solve it. Camp Director will be notified.
- **Second offense:** If the undesirable behavior continues a time-out will be administer and the Counselor and Camp Director will document the situation and may call parent/guardian.
- **Third offense:** If the problem persists, the Counselor and Camp Director will contact the parent/guardian. A solution will be determined, with the possibility of removal from camp.
- **Fourth Offense:** If the camper does not respond to the first three steps, the Camp Director will phone parents to inform them their child needs to be pick-up from camp. **If a camper is sent home due to disciplinary problems, there will be no refunds.**
- If a serious infraction of the Camp Policies such as illegal activity (i.e.: illegal substances, possession of weapons, endangering others, etc.), the Director will move to Step #4. Parents/guardian & authorities will be contacted. Camper's belongings will be subject to search- If this is deemed necessary, every effort will be made to contact parents/guardians first.

RESIDENT CAMP PACKING LIST

The following is a personal supply list for camp. Campers need to pack clothing and shoes appropriate for the active, physical nature of the camp. Remember this is a four-day overnight camp, no laundry facilities are available. Please include enough clothes for four days. Mark all personal belongings with camper's name. Do not bring expensive cameras, jewelry, cell phones, binoculars, electronic games or other valuables. Pocket knives or weapons of any kind are not allowed.

**ABSOLUTELY NO FOOD, GUM OR CANDY WILL BE ALLOWED IN THE CABINS!
THIS WILL BE STRICTLY ENFORCED. (Special dietaries foods are stored in the Dining Hall.)**

REQUIRED ITEMS: (Please refer to the dress code on your Camper Policy Form).

- Jacket
- Sweater or sweatshirt
- Enough clothes for four days (refer to camp dress code when selecting clothing):
 - underwear
 - pants & shorts
 - socks
 - t-shirts - short & long sleeved
- Shoes (two pair of closed toed, sturdy, comfortable hiking boots or tennis shoes)
- Shower shoes
- Pillowcase or laundry bag for dirty laundry (no trash bags please)
- Hat
- Pajamas / robe (knit sweat suits are great to sleep in)
- Warm sleeping bag or sheets & warm blankets
- Pillow
- Comb/brush
- Toothbrush and toothpaste
- Towel(s) and washcloth(s)
- Shampoo/conditioner
- Soap
- Lip Balm/Chap-stick, sunscreen, body lotion, deodorant, foot powder
- Backpack / fanny pack
- Rain gear (poncho or rain jacket)
- Flashlight
- Refillable water bottle (or Camel Pac)
- Sunglasses/Sunscreen
- Medication (if needed). Prescription Medication must be in original containers, labeled with child's name and parent must meet with the Camp Nurse during check-in (Over-the-counter medication is not allowed without a prescription).

OPTIONAL ITEMS

- Swimsuit (if your child is uncomfortable in shower area. Each shower has a curtain for privacy)
- Reading light
- Disposable camera
- Books
- Stationery & pre-addressed, stamped envelopes for letter writing

Food Questionnaire - Please fill out
Refer to the Camp Menu Below

Childs Name _____

Childs Birthday _____ *Is it during Camp?* _____

Does your child have any food allergies? _____

Does your child have any special dietary needs? _____

Is your child: vegetarian or vegan? _____

Is there anything on the menu that your child will not eat? (a peanut butter and jelly sandwich will replace the item if necessary)

Vegetarian substitutes are available for campers that are designated as vegetarian.
All Dinners are served with Dessert and a nutritious bedtime snack is served daily.

ECHO MENU

****Menu is a sample only****

Day Of Week	Breakfast	Lunch	Dinner
Sunday	N/A	N/A	Pasta Night Penne Pasta Meatballs Garlic Bread Salad Fresh Veggies Ice Cream Bar
Monday	Ham Steaks Home Fried Potatoes Scramble Eggs Fresh Fruit Cold and Hot Cereal	Hamburgers Veggie Burgers Coleslaw Chips Fresh Fruit	Tacos Night Soft-shell and Hard-shell Chicken or Beef Salsa and Chips Rice and Beans Salad (Option) Ice Cream for Dessert
Tuesday	Breakfast Sandwiches with Egg, Sausage, Cheese Home fried potatoes Cold and Hot Cereal	Beef Hotdogs with wrapped bacon Macaroni and Cheese Chips Watermelon	BBQ Pulled Pork Coleslaw Garlic Toast Brownies Salad
Wednesday	French Toast Bacon Fresh Fruit Cold and Hot Cereal	Chicken Tenders Potatoes Fruit	

Vegetarian substitutes are available for campers who have indicated on the registration form they are vegetarian.
Snacks are provided through-out the day along with an evening snack.

“Things You Need to Know”

- Camp is a place for your child to have fun and get dirty, please do not send new clothes. Pack your comfortable favorites!
- Cell Phones do not work here at Camp Lee, please leave them at home. We are not responsible for lost or stolen items. It is much safer to have them bring a digital camera.
- Parents must accompany their child to the check-in; prepare for at least at 30-minute check in
- **Please do not arrive early!** Check In begins at 1:30pm & 2:40pm at Camp Lee Canyon.
- Please leave pets at home- they are not allowed in camp.
- Return from Camp Lee - Pick-up: Campers are released to the parent/guardian listed on the Camp Registration Form as Parents/Guardians or authorized escorts/emergency contacts. I.D. is required for pick up.
- Campers must be picked up starting at 3:30p.m. on Wednesday July 15th for Echo Camp.

Contacting Your Camper

- **Mail:** If you would like to send a letter to your child, we suggest you mail it early - mail service is slow at Camp Lee. If you think your child may want to write letters to their family and friends, please pack pre-addressed envelopes & stamps for your camper. The camp address is:

Camp Lee Canyon:

ECHO CAMP

Attn: (your child's name and **Cabin number**)

6201 Lee Canyon Rd.

Mt. Charleston, NV 89124

- **Phone:** Camp Lee phone number is 702-872-7083. Please use this number as “in-case of emergency”. We understand; you will miss your child. Please know, we are keeping your child busy with fun and positive activities and creating a great “Camp Experience”! We are encouraging you to refrain from calling your child- Thank you!

Section 1: Camper Demographics/ Insurance Information:

Camper Name: _____ Sex: _____ Birth date: _____ Age: _____

Home address: _____ City: _____ State: _____ Zip: _____

Parent/guardian: _____ Phone: _____

Insurance Company: _____ Policy Number: _____ Expiration: _____

In the event that I cannot be reached in an emergency, I hereby authorize Clark County personnel to secure proper treatment for my child, including but not limited to: injections, X-rays, anesthesia, surgery, and hospitalization. By granting this authorization, I further agree to indemnify and hold harmless Clark County, its employees and agents from any damage, illness or death resulting from participation in the Camp Lee Canyon Camp. I also agree to the release of any records necessary for insurance purposes or medical treatment.

Parent Signature: _____ Date: _____

Section 2: Camper Health Information:

Has/does the participant:

	Yes	No	if yes please explain*
1. Had any recent injury, illness, or infectious disease?.....	_____	_____	_____
2. Have a medically prescribed meal plan or dietary restrictions?	_____	_____	_____
3. Have a chronic or recurring illness/condition?.....	_____	_____	_____
4. Have frequent headaches?.....	_____	_____	_____
5. Ever had a head injury/been knocked unconscious?.....	_____	_____	_____
6. Ever had frequent ear infections?.....	_____	_____	_____
7. Ever passed out/been dizzy during or after exercise?.....	_____	_____	_____
8. Ever had a seizure?.....	_____	_____	_____
9. Ever had high blood pressure/ Diagnosed heart murmur?.....	_____	_____	_____
10. Ever had an orthopedic or back problem?.....	_____	_____	_____
11. Have diabetes?.....	_____	_____	_____
12. Have asthma?.....	_____	_____	_____
13. Have seasonal/environmental allergies?.....	_____	_____	_____
14. Had problems with diarrhea/constipation?.....	_____	_____	_____
15. Have problems with sleep walking?.....	_____	_____	_____
16. Have a history of bed-wetting?.....	_____	_____	_____
17. Ever had an eating disorder?.....	_____	_____	_____
18. Ever had emotional difficulties for which professional help was sought?.....	_____	_____	_____

* Please attach extra page if necessary

Section 3: Camper Medication Information:

Medications and Authorization to Assist with Administration

Camper Name _____

Please list ALL prescribed medications taken routinely. Parent/guardian must send enough medication to last the entire time at camp. ALL medications must be turned into the camp nurse **IN THE ORIGINAL CONTAINER (with the prescribing doctor listed, administration orders, and a date that will not be expired during camp)** at the time of check in. Medications without the original container/prescription or that are expired **WILL NOT BE ACCEPTED** (this includes inhalers and epi-pens). The nurse can only give properly prescribed medication. The nurse also has standing orders for Tylenol, Pepto Bismol, and Benadryl. Vitamins, unless prescribed, cannot be given to the child, nor may the child have them at camp.

MEDICATION	DOSE	FREQUENCY	TIME(S)	ROUTE

***Special administration instructions, along with any other necessary information:**

***Medication that is not listed above and reviewed by camp health personnel prior to camp, but is needed at the time of camp, MUST be accompanied by a doctor's prescription.**

Clark County Parks & Recreation has standing doctor's orders for age-appropriate administration of acetaminophen (Tylenol), Benadryl, and Pepto-Bismol.

I hereby authorize administration of the above medication(s) to my child by Clark County Department of Parks and Recreation. By granting this authorization, I further agree to indemnify and hold harmless Clark County, its employees, and agents, from any damage, illness, or death resulting from the administering of this medication in accordance with the instructions provided on this form.

Parent/Guardian Signature: _____ Date: _____

(Section 3 must be signed and dated prior to obtaining camp physical and physician signature whether the child has meds or not)

_____ Please initial here only if you DO NOT want your child to receive Tylenol, Benadryl and Pepto-Bismol per standing orders.

Section 4: Camper Physical Examination:

Camper Name _____

THIS PAGE TO BE COMPLETED BY PHYSICIAN or NURSE PRACTITIONER

Physical Examination:

Examination	Normal/Results	Abnormal Findings	Explain
Appearance			
Height			
Weight			
Temperature			
Heart Rate			
Blood Pressure			
Eyes/Ears/ Nose/Throat			
Lymph Nodes			
Teeth			
Lungs			
Heart			
Abdomen			
Skin			
Posture			
Range of Motion			

1. Participant cleared for activities while at Camp Lee Canyon which is situated at an elevation of 8,500 ft. Activities may include hiking, running, climbing, or dancing: **YES / NO**

Any Activity restrictions listed here: _____

2. I have reviewed pages 1, 2, and 3 of this form and concur with parent/guardian's requested medications and description of health status: **YES / NO**

Physician/Nurse Practitioner (print/type): _____ **Phone:** _____

Physician/Nurse Practitioner Signature

Date

Clark County Parks & Recreation

Mountain Biking Waiver

	Activity Information	<u>COST</u>	<u>INITIAL</u>
Mountain Biking	Participants will first learn the basics of the bike like body positioning, braking, gears. Once comfortable campers will learn to ride on an easy camp's course.	<u>FREE</u>	

ACTIVITY PERMISSION & WAIVER FORM

Participant Name _____ Date _____

Participant Name _____

Primary Contact _____ Phone _____

Secondary Contact _____ Phone _____

Allergies/Special/Accommodations _____

I, _____ acting on behalf of my organization, myself or my minor child do expressly and forever waive, release, and hold harmless and indemnify Clark County from and against any and all claims, demands, obligations, causes of action and lawsuits, and all damages, liabilities, fines, judgments and costs (including reasonable attorney's fees) associated with, arising from or alleged to have risen from the actions or omissions of myself, my minor child or the organization, its agents, employees or contractors, in connection with the event, or any failure to comply with the laws, ordinances, rules and regulations applicable to the duties and responsibilities set forth herein. Clark County reserves the right to revoke this reservation should any information herein be found to be inaccurate or untrue

PHOTO/VIDEO RELEASE: By registering for any Clark County Parks and Recreation program, I agree to allow publication of photos or video taken of my child/children or myself at any program, event or facility associated with the Clark County Parks and Recreation Department. I understand my child(ren) will be participating in these selected events on their designated days.

Parent/Guardian Signature _____ Date _____

Clark County Parks & Recreation

Special Event Activities Waiver- ECHO CAMP

	Activity Information	<u>COST</u>	<u>INITIAL</u>
Inflatables	<u>Obstacle Course:</u> Participants will run, jump, and climb through a series of challenges to reach the end of the obstacle course.	<u>FREE</u>	
	<u>Hungry Hippo:</u> Participants will be bungee corded to the sides of the inflatable and will have to grab as many balls from the middle as they can before all of them are gone.	<u>FREE</u>	
	<u>Slip 'N Slide:</u> Participants will slip and slide down a 25ft long strip equipped with bumpers and sprinklers.	<u>FREE</u>	
Bounce House	Traditional bounce house featuring a jumping (bounce) area with a ladder and a slide.	<u>FREE</u>	
Archery Tag	Archery Tag is a combination of dodgeball, paintball, and archery. Participants hit each other with non-lethal arrows to score points or eliminate opposing team members.	<u>FREE</u>	
Laser Tag	Laser Tag is a shooting game where participants eliminate other players by shooting targets on vests with laser guns.	<u>FREE</u>	

ACTIVITY PERMISSION & WAIVER FORM

Participant Name _____ Date _____

Participant Name _____

Primary Contact _____ Phone _____

Secondary Contact _____ Phone _____

Allergies/Special/Accommodations _____

I, _____ acting on behalf of my organization, myself or my minor child do expressly and forever waive, release, and hold harmless and indemnify Clark County from and against any and all claims, demands, obligations, causes of action and lawsuits, and all damages, liabilities, fines, judgments and costs (including reasonable attorney's fees) associated with, arising from or alleged to have risen from the actions or omissions of myself, my minor child or the organization, its agents, employees or contractors, in connection with the event, or any failure to comply with the laws, ordinances, rules and regulations applicable to the duties and responsibilities set forth herein. Clark County reserves the right to revoke this reservation should any information herein be found to be inaccurate or untrue

PHOTO/VIDEO RELEASE: By registering for any Clark County Parks and Recreation program, I agree to allow publication of photos or video taken of my child/children or myself at any program, event or facility associated with the Clark County Parks and Recreation Department. I understand my child(ren) will be participating in these selected events on their designated days.

Parent/Guardian Signature _____ Date _____

Clark County Parks & Recreation

Archery Waiver

	Activity Information	<u>COST</u>	<u>INITIAL</u>
Archery	<u>Archery Course:</u> Participants will use bow, arrows, and targets on the archery course.	<u>FREE</u>	

ACTIVITY PERMISSION & WAIVER FORM

Participant Name _____ Date _____

Participant Name _____

Primary Contact _____ Phone _____

Secondary Contact _____ Phone _____

Allergies/Special/Accommodations _____

I, _____ acting on behalf of my organization, myself or my minor child do expressly and forever waive, release, and hold harmless and indemnify Clark County from and against any and all claims, demands, obligations, causes of action and lawsuits, and all damages, liabilities, fines, judgments and costs (including reasonable attorney's fees) associated with, arising from or alleged to have risen from the actions or omissions of myself, my minor child or the organization, its agents, employees or contractors, in connection with the event, or any failure to comply with the laws, ordinances, rules and regulations applicable to the duties and responsibilities set forth herein. Clark County reserves the right to revoke this reservation should any information herein be found to be inaccurate or untrue

PHOTO/VIDEO RELEASE: By registering for any Clark County Parks and Recreation program, I agree to allow publication of photos or video taken of my child/children or myself at any program, event or facility associated with the Clark County Parks and Recreation Department. I understand my child(ren) will be participating in these selected events on their designated days.

Parent/Guardian Signature _____ Date _____

CLARK COUNTY PARKS AND RECREATION
CAMP LEE CANYON CHALLENGE COURSE
PARTICIPANT INFORMATION FORM & RELEASE LIABILITY

DISCLOSURE:

The challenge course involves a variety of activities including warm-ups, games, group initiatives, low and high course elements, and other rigorous physical activities in a wooded, outdoor, 8,500 feet altitude setting. The level of participation during each activity is completely voluntary. Highly trained staff, maintenance of state-of-the-art equipment, and strict safety standards safeguard all participants and facilitators against possible injury. As with any program of this type, there is a risk that must be assumed by each participant that he/she may suffer an emotional or physical injury or disability.

MEDICAL INFORMATION (information to be completed by parent or guardian if participant is under 18 years of age):

Please answer all information thoroughly and honestly. This information is important for your safety and will not be used as a screening process to exclude you from the program. Certain health/medical information must be made known to the facilitator(s) conducting the program so that they will be prepared to respond appropriately if the need arises. Participant or parent (if child is under 18 years of age) will be responsible for knowing their medical condition and whether it will prohibit them from safely participating in any challenge course activities. Under certain circumstances, a medical release from your physician may be required. This information will be kept confidential unless needed in an emergency situation.

1. Participant Name (print) _____

2. Do you have health/accident insurance? _____ Yes _____ No
If yes, name if insured and what company?

Policy # _____

3. Do you have limiting physical disabilities or handicaps (temporary or permanent)?
_____ Yes _____ No (If yes, identify and explain)

4. Check any of the following that have been a part of your health history (give approximate dates):

allergy reactions	_____	arthritis	_____
autism	_____	back condition	_____
balance problems	_____	bowel/bladder control	_____
development disability	_____	problems	_____
diabetes	_____	head injury	_____
heart disease/defect	_____	hemophilia	_____
lung disease	_____	mental illness	_____
Intellectual disability	_____	seizures	_____
stroke	_____	other: _____	_____

specify other health concerns:

5. Are you currently taking medication (prescribed or otherwise)?
____ Yes ____ No (If yes, state what you are taking and what condition it's for.)

6. Do you have any allergic reactions to medications, insect bites or any other medical limitations?
____ Yes ____ No

7. Person to notify in case of emergency:

Name: _____

Address: _____

Phone: home - _____ work - _____ cellular - _____

INFORMED CONSENT:

I, _____, on behalf of myself or my minor child _____, understand that part of the Lee Canyon Challenge Course may be physically or emotionally demanding. I affirm my health is good and that I am not under a physician's care for any undisclosed condition that might endanger my (or my minor child's) health or the health of other participants.

I recognize the inherent risk of injury or disability, even death in Challenge Course activities. It is further understood that unforeseen circumstances may arise for which Clark County, Nevada shall not be held responsible.

I, the undersigned acknowledges that I have read the Challenge course checklist provided by Clark County Parks & Community Services and accept full responsibility for the result of inadequate clothing or equipment and for clothing and equipment which I fail to provide.

WAIVER OF LIABILITY:

I hereby voluntarily assume and accept all personal responsibility for my or my child's behavior, and for all risk of injury, illness, disease or death, and release any rights or claims for damages and agree to indemnify, defend, and hold harmless CLARK COUNTY, its staff, agents, and all individuals assisting in facilitating and conducting these activities, from all liability of any nature for any and all injuries, loss or damage suffered at, or in any way connected to participation in the Camp Lee Canyon Challenge Course program. This does not preclude SIIS claims from Clark County and other government employees.

My signature below will also indicate that I have been informed about the nature of Challenge Course activities, and I will participate in only those activities that are within my abilities and limitations. I have read, understood and accepted the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding hereafter.

EMERGENCY MEDICAL RELEASE (parents/guardian only):

In the event that I cannot be reached in an emergency, I hereby authorize Clark County personnel to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child.

Date: _____

Participant Name (print): _____

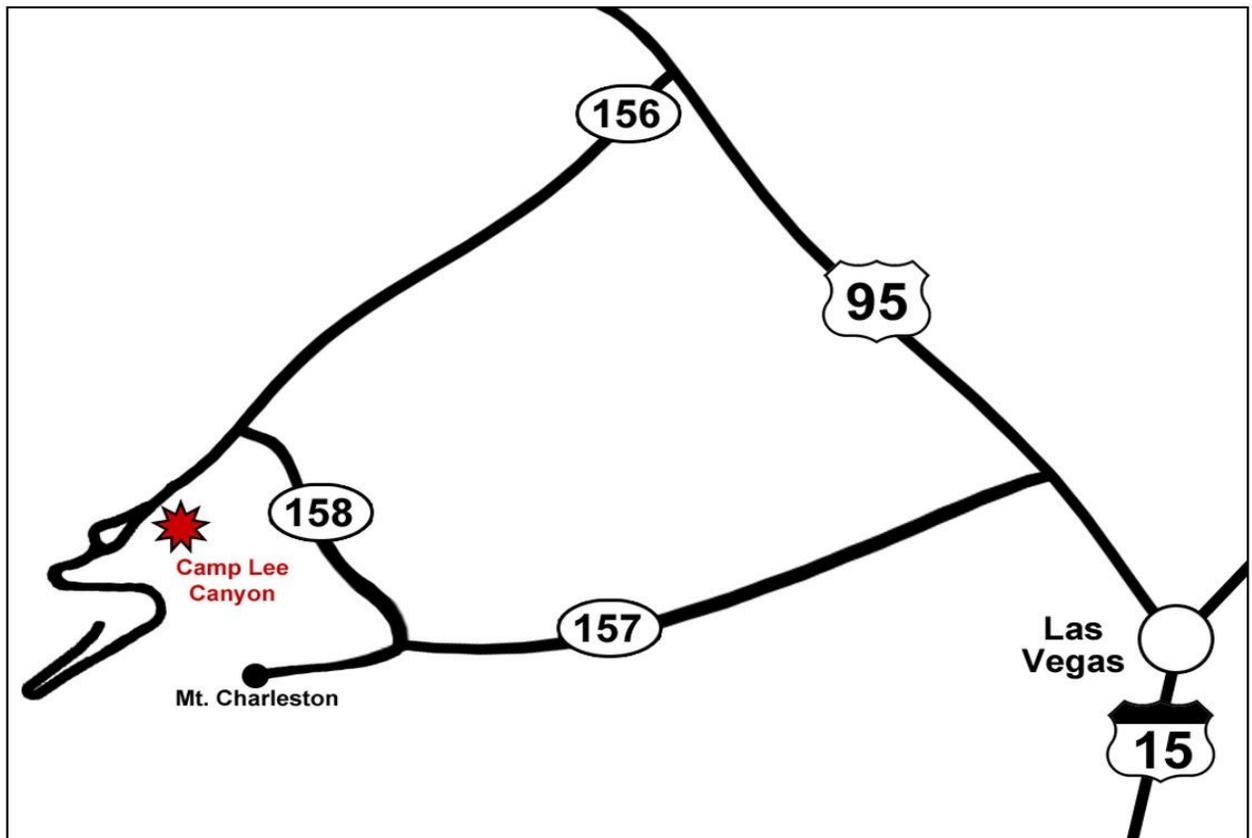
Participant Signature: _____ Age: _____

Parent/Guardian Name (If participant is under 18 years of age):

Parent/Guardian Signature (If participant is under 18 years of age):

Directions to Camp Lee Canyon

Camp Phone: (702) 872-5489



Allow at least one hour of travel time from the Las Vegas area. Camp Lee Canyon is located on Lee Canyon Rd., about 45 miles northwest of Las Vegas at an elevation of over 8,000 feet. There are no gas stations or convenience stores on Mt. Charleston, so it is best to fill up before driving up the mountain. In the summer months, it is also a good idea to bring drinking water as a travel precaution. There is no cellular phone service in the camp area.

To get to Camp Lee Canyon, travel north along US 95 about 30 miles from Las Vegas. You will pass the turn off for Mt. Charleston/ Kyle Canyon (Route 157). Keep going on US 95. Turn west (left) at the Lee Canyon turn off (Lee Canyon Rd.) Stay on Lee Canyon Rd. for approximately 15 miles. On this road you will be climbing in elevation from 3,000 feet to 8,000 feet. (This part of the drive can cause overheating in older cars, so watch your temperature gauge. Turning off your air conditioner may help lower your engine temperature.)

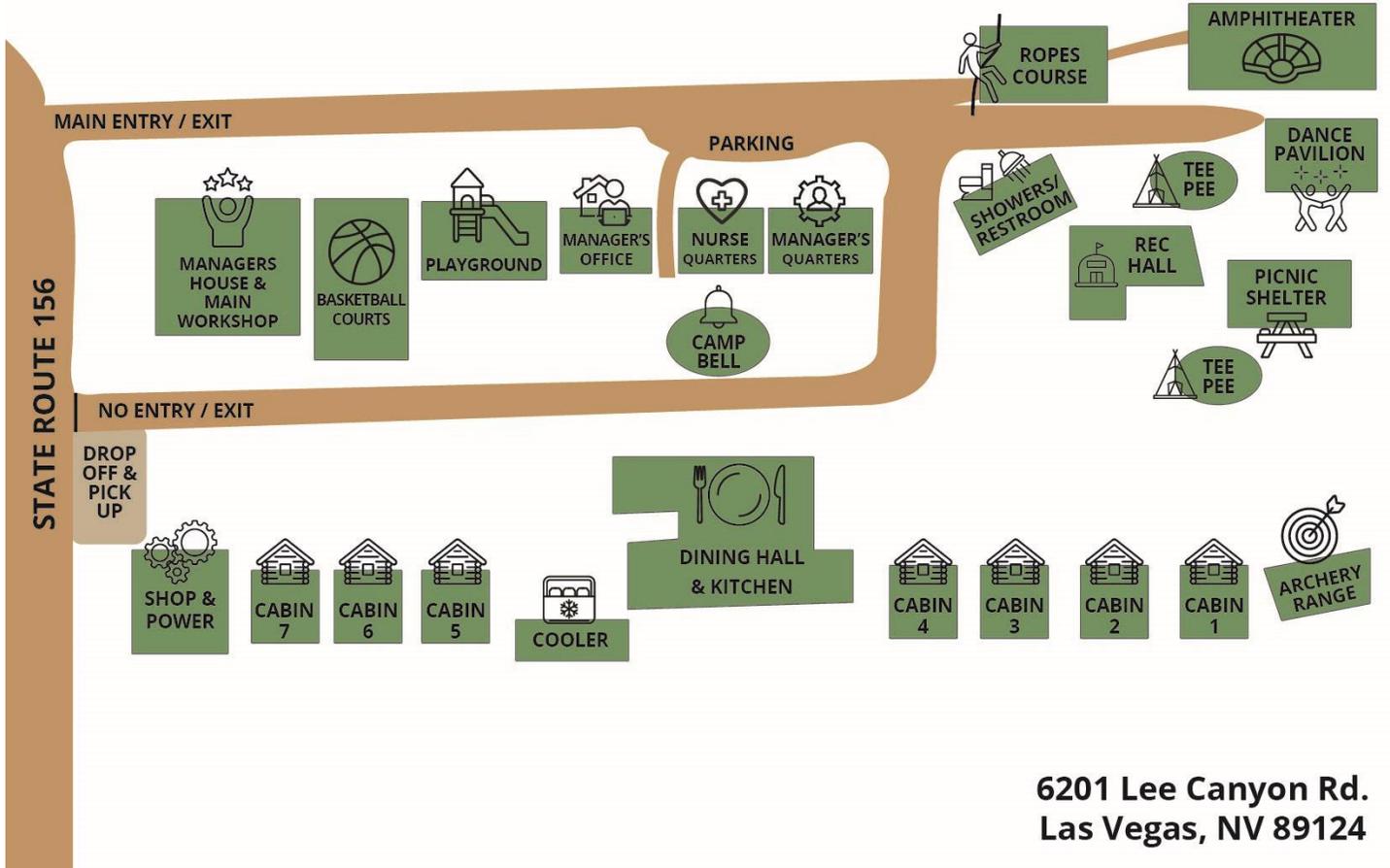
As you travel up Lee Canyon Rd, you will pass the turn off you Route 158 and you will also pass the road for Camp Foxtail and the meadow play area. Stay on Camp Lee Rd.. Once you have passed those landmarks - you're almost there! The entrance to Camp Lee Canyon is on the left side of the road. The camp is set back off the road but is marked by signage. Turn left into the camp, just before the McWilliams campground and the Lee Canyon ski area.



togetherforbetter

Parks & Recreation

CAMP LEE CANYON



6201 Lee Canyon Rd.
Las Vegas, NV 89124