



FORT CASWELL

COSTAL RETREAT & CONFERENCE CENTER

100 Caswell Beach Road • Oak Island, NC 28465 • (910 278-9501

Guest/Counselor Registration Form Please Sign and Return on Arrival

The North Carolina Baptist Assembly holds group leaders responsible for the activity and conduct of individuals in their groups. This includes ensuring specified chaperone/youth ratios are met and all policies and rules are followed. Fort Caswell also holds the leadership and organization renting space for any events responsible for the physical and moral conduct of this group, ensuring that chaperones and leaders of children and youth are properly screened to protect them from acts of abuse. This screening by the renting party might include, but is not limited to, background checks, criminal record checks, interviews, references, etc.

Church: _____ **Conference Date:** _____
Address: _____

A parent's signature must appear on this form for each child 17 years of age or younger before First Aid can be administered, or a doctor's assistance procured, or before insurance coverage becomes effective. A parent's signature authorizes the group's counselors to act on behalf of the parents in the event of an accident or illness while their child is participating in programs at Fort Caswell. The group counselor will notify parents immediately of any major accident or illness before making any decisions relative to treatment.

	Name of Counselor	Age	Sex	Signature of Pastor/Teacher
1				
2				
3				
4				
5				

	Name of Camper/Guest	Age	Sex	Parent's Signature
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Group Leader Acknowledgement Form

Welcome to Fort Caswell. We look forward to your stay with us. So that everyone visiting Fort Caswell may be assured of receiving important information, we require that the group leader agree to disseminate all safety information to his/her group members. The items listed below, as well as all other pertinent information from Fort Caswell should be shared with your group prior to, or immediately upon, their arrival on campus. Thank you for your assistance.

Responsibilities _____ Program (when applicable) - Convention Program Staff
Facility - Caswell Staff
Discipline and Safety - Group chaperones/leaders

Parking _____ All vehicles must be parked in such a way as to not obstruct the view of the roadway.

Speed Limits _____ On campus - 20 mph

Guest Assistance _____ Reception Center, Office, or Gate Guard. Check with the Guard at the gate if staff is temporarily out of the Reception Center or after office hours (8:00-5:00) and weekends.

Accidents _____ Contact Caswell staff at the reception center or office in case of any accident. Guest insurance pays up to \$2,500 for medical treatment of injury due to an accident, off-campus trips excluded. Accident report and insurance forms are essential. Gate security staff may also be of assistance in contacting Caswell staff to assist you.

Medical Emergency _____ Please make Caswell/Gate Security staff aware of any emergency or need for 911 service.

Prohibitions _____ Water balloons, shaving cream fights, water guns, skateboards, firearms, fireworks, alcoholic beverages, illegal drugs, or ATV's.

Swimming _____ Only at the pool and designated beach swimming area at designated times. Lifeguards provided at the beach only during summer camp weeks. All other times swimming at the beach is at your own risk. Adult supervision of swimmers from your group is required whenever a lifeguard is not present. Bathing suit cover-ups must be worn everywhere on campus except the beach or pool. All swimmers must obey instructions of the lifeguards and observe pool or beach rules.

Forts and Batteries _____ Visit during daylight hours only and exercise caution. Adult supervision from the group is required for minors at all times while on or in the forts or batteries.

An Urgent Request _____ Please encourage your group to take care of their building. Damage charges will be billed to the group leader or church. Extreme cases will result in the suspension of privileges.

I have read and understand the above rules of conduct for guests at Fort Caswell. I accept the responsibility to inform my group members concerning these requirements.

Name of Group Leader (please print) _____ Date ___/___/___

Group Leader Signature _____

Group Name (please print) _____

Group Leader Cell (please print) _____