



October 20, 2023

Dear Pediatric MS Families,

We are excited to invite you to Oscar's sixth annual Buddy Bash! Oscar's Buddy Bash is a time for families to connect, share experiences, learn from MS specialists, and enjoy some winter activities.

Please complete the **entire** application and submit a **\$25/person non-refundable deposit**, then return to us by either scanning and emailing to oscar@mroscarmonkey.org or by mailing it to us:

Mr Oscar Monkey
N1462 510th St,
Menomonie, WI 54751

The deadline for all completed applications is **December 31, 2023**.

Oscar's Buddy Bash will be held **February 16-19, 2024**.

This is a family camp. Children under 18 may not attend alone. Two family member minimum.

Non-refundable deposits can be mailed to the above address or made online: paypal.me/mroscarmonkey

Oscar's Buddy Bash has been made possible through outside financial donations. We are unable to provide transportation from the airport to camp. The camp is located approximately 20 minutes from the Minneapolis/St. Paul airport and is easily accessible through Uber, Lyft, and rental cars.

Camp Eden Wood (our host) is requiring an estimated number of attendees 90 days before the start of Oscar's Buddy Bash (November 16). We will be responsible for lodging for this number, this also guarantees bed space. Though our application deadline is December 31, if at all possible, please notify us of your intent to attend Oscar's Buddy Bash before November 10, 2023. Contact us for more information.

Oscar's Buddy Bash will be held at Camp Eden Wood in Eden Prairie, Minnesota. Camp personnel will include staff from Camp Eden Wood, board members from Mr Oscar Monkey, and volunteers from various MS organizations.

Please contact us with any questions about the program or application. We can be reached via email at oscar@mroscarmonkey.org or at 651-233-4636.

Looking forward to a great Buddy Bash kick off!

Oscar the MS Monkey

Mr Oscar Monkey
N1462 510th St
Menomonie, WI 54751

oscar@mroscarmonkey.org
651-233-4636

Camp Date: February 16-19, 2024
Application Deadline December 31, 2023

A NOTE ABOUT WINTER IN MINNESOTA

While every effort will be made to keep sidewalks and driveways clear of snow and ice, it will be winter and conditions can change rapidly. If you experience mobility challenges or have equipment that may be difficult to maneuver in those conditions, please plan accordingly.

All buildings at the camp are accessible.

We will be traveling between buildings throughout the weekend.
For longer distances (dorm to dining hall), use of a car is permitted.

A NOTE ABOUT BEDDING, TOWELS and OTHER IMPORTANT ITEMS

We request that all campers please bring bedding and towels, as you are able.

If unable to provide your own bedding,

you may request linen rental on page 5 of your registration form.

This **MUST** be requested at the time of registration to guarantee availability of linens.

OSCAR'S BUDDY BASH APPLICATION

Contact Information

Parent 1 Name _____ **Date of Birth** _____

Address _____

City _____ **State** _____ **Zip** _____

Home Phone number _____ **Cell Phone number** _____

Email Address _____

T-Shirt Size (Please circle one: Small Medium Large Extra Large Other _____

Dietary Restrictions/Allergies: _____

Parent 2 Name _____ **Date of Birth** _____

Address same as Parent 1 YES / NO

if no:

Address _____

City _____ **State** _____ **Zip** _____

Home Phone number _____ **Cell Phone number** _____

Email Address _____

T-Shirt Size (Please circle one: Small Medium Large Extra Large Other _____

Dietary Restrictions/Allergies: _____

Child 1 Name _____ **Date of Birth** _____

Address same as Parent 1 YES / NO

Address same as Parent 2 YES / NO

if no:

Address _____

City _____ **State** _____ **Zip** _____

Home Phone number _____ **Cell Phone number** _____

Email Address _____

T-Shirt Size (Please circle one: Small Medium Large Extra Large Other _____

Dietary Restrictions/Allergies: _____

Child 2 Name _____ **Date of Birth** _____

Address same as Parent 1 YES / NO Address same as Parent 2 YES / NO
if no:
Address _____

City _____ State _____ Zip _____

Home Phone number _____ Cell Phone number _____

Email Address _____

T-Shirt Size (Please circle one: Small Medium Large Extra Large Other _____

Dietary Restrictions/Allergies: _____

Child 3 Name _____ **Date of Birth** _____

Address same as Parent 1 YES / NO Address same as Parent 2 YES / NO
if no:
Address _____

City _____ State _____ Zip _____

Home Phone number _____ Cell Phone number _____

Email Address _____

T-Shirt Size (Please circle one: Small Medium Large Extra Large Other _____

Dietary Restrictions/Allergies: _____

Other Name _____ **Date of Birth** _____

Address same as Parent 1 YES / NO Address same as Parent 2 YES / NO
if no:
Address _____

City _____ State _____ Zip _____

Home Phone number _____ Cell Phone number _____

Email Address _____

T-Shirt Size (Please circle one: Small Medium Large Extra Large Other _____

Dietary Restrictions/Allergies: _____

Who in the family has MS? _____

How did you hear about Oscar's Buddy Bash? _____

LINENS: Number of linen sets requested _____ X \$18 = _____

EMERGENCY CONTACT: (CANNOT BE ATTENDING OSCAR'S BUDDY BASH)

Name: _____ Phone: _____

Relationship: _____

Address: _____

City: _____ State: _____ Zip: _____

Permission Page

Y N May we photograph and/or videotape all members of your family for educational purposes?

Y N May we photograph and/or videotape all members of your family for fundraising purposes? It is understood that these photographs and videotapes may be used for promotional purposes and to promote public understanding and support of the Buddy Bash and Oscar the MS Monkey.

Y N May we photograph or videotape all members of your family for distribution within Buddy Bash attendees, as “memories” of the Buddy Bash?

Signature of Parent 1: _____ **Date** _____

Signature of Parent 2: _____ **Date** _____

Buddy Bash Contract

All medication distribution is the responsibility of each family.

All volunteers, staff members, and campers will be treated with courtesy and respect.

Because Camp Eden Wood is a non-smoking venue, smoking is not permitted anywhere on the camp grounds during the Buddy Bash. Because this is a family event, the use of alcohol and other controlled substances is strictly forbidden during Oscar's Buddy Bash.

All family members will respect the direction of the program coordinators and volunteers.

Participating in activities leading to possible injuries is done at the participants discretion. If the participant is injured, the participant and/or the participant's parents (if participant is under 18) are responsible for all costs of medical treatment. Mr Oscar Monkey will not be held accountable.

Damage to equipment, facilities, camp property, or any other shared space or items, is the responsibility of each individual/family and not the responsibility of Oscar's Buddy Bash/Mr Oscar Monkey.

Signature of Parent 1: _____ **Date** _____

Signature of Parent 2: _____ **Date** _____

Signature of Child 1: _____ **Date** _____

Signature of Child 2: _____ **Date** _____

Signature of Child 3: _____ **Date** _____

Signature of Other: _____ **Date** _____

Travel Information

Transportation information must be provided by December 31, 2023

Please plan to **arrive** either to Camp Eden Wood or MSP airport between 12-4pm on February 16.

Please plan to **depart** Camp Eden Wood or MSP airport after 12pm on February 19.

Y N I will drive to Camp Eden Wood: **6350 Indian Chief Rd, Eden Prairie, MN 55346**

Y N I will fly into the Minneapolis/St Paul (MSP) airport

Y N I will take the train to St Paul, MN

ARRIVAL INFORMATION:

Airline/Train: _____ Flight Number: _____

Departure Airport/Train: _____ Departure Time: _____

Arrival Time: _____

DEPARTURE INFORMATION:

Airline/Train: _____ Flight Number: _____

Arrival Airport/Train: _____ Departure Time: _____

Arrival Time: _____

Other Transportation Information:

MAIL OR EMAIL APPLICATION TO:

(Please retain a copy for yourself)

Mr Oscar Monkey

N1462 510th St

Menomonie, WI 54751

oscar@mroscarmonkey.org

651-233-4636

Camp Date: February 16-19, 2024

Application Deadline December 31, 2023

LIABILITY WAIVER
(One per person - please print one for each family member)

Camp Eden Wood

I, the undersigned, on my own behalf and/or as the parent/guardian of the minor so named (the "Participant"), hereby agree to the following:

COMPLETE WAIVER, RELEASE, AND COVENANT NOT TO SUE. In consideration of True Friends permitting the Participant to be present upon and use the facility commonly known as Camp Eden Wood, 6530 Indian Chief Rd., Eden Prairie, MN 55346 (the "Facility"), and/or participate in the Activities (as defined below) I, on my own behalf and on behalf of Participant if a minor, hereby waive liability on the part of, discharge and agree not to sue or to execute upon any judgment against, and release True Friends, its employees, representatives, directors, instructors, successors, or assigns (collectively, "True Friends"), from any and all liability, loss, injury, death, damages, costs, expenses, including costs and attorneys' fees, causes of action, and claims of any kind or type, which may have arisen, or may arise, while the Participant is present upon or using the Facility and/or participating in the Activities, except to the extent any claims arise out of or are the result of the grossly negligent or intentionally wrongful acts or omissions of True Friends.

ASSUMPTION OF RISK. I am fully aware that there may be risks and hazards associated with being present upon and using the Facility, and I, or the Participant, elect to voluntarily be present upon and use the Facility knowing that there may be risks or hazards. I further understand that while present upon the Facility, I or the Participant may voluntarily participate in activities offered by True Friends, which activities may include, but are not limited to, a challenge course, zip line course, golf cart operation, and waterfront and/or aquatic center use (each an "Activity" and collectively, "Activities"). I acknowledge and agree, on my own behalf and on behalf of the Participant, that the Activities are inherently dangerous and subject the Participant to physical exertion and the possibility of physical illness or injury, ranging from minor to serious or catastrophic injuries and/or death. Risks include, but are not limited to, drowning, falling, injuries resulting from latent or apparent defects or conditions in equipment or property supplied by True Friends, and injuries resulting from Participant's own physical condition and skill level and Participant's own acts or omissions. I, on my own behalf and on behalf of the Participant, acknowledge that the Participant is assuming the risk of such illness or injury and agree to bear full responsibility and sole liability for any death, bodily injury, illness, or damage incurred by Participant, excepting if caused in whole or part by the intentional wrongful acts, omissions, or errors, or gross negligence of True Friends, its employees and representatives.

I UNDERSTAND THAT THIS IS A COMPLETE RELEASE OF ANY AND ALL POSSIBLE CLAIMS AGAINST TRUE FRIENDS AND THAT I EXPRESSLY RELEASE ANY CLAIMS RELATED TO ANY INJURIES I MAY SUFFER FROM THE NEGLIGENCE OF ANYONE IN CONNECTION WITH THE FACILITY OR ACTIVITIES, UNLESS SUCH INJURIES RESULT FROM THE GROSS NEGLIGENCE OR INTENTIONAL WRONGFUL ACTS OF ANYONE IN CONNECTION WITH THE FACILITY OR ACTIVITIES.

I, on my own behalf and on behalf of Participant if a minor, hereby represent and warrant that I have read this General Liability Waiver in its entirety and fully understand its contents. I, on my own behalf and on behalf of Participant, have signed this General Liability Waiver voluntarily and of my own free will.

Print Name of Participant

Signature of Participant
(or parent/guardian of participant if a minor)

Date