



Santee Blind Fishing Weekend Application

April 22 – 23, 2022

Client Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

Adult Shirt Size: Small Medium Large Extra Large

Gender: _____ Ethnicity: _____ Age: _____

Have you attended this event in the past? Yes No

Please describe your vision status:

Legally blind Low vision Reduced vision in one or both eyes

Other: _____

Please select the location from which you will catch the bus to the event:

Charleston Summerville St. George

I don't need transportation to the event

Please select your preference for fishing:

Fish from a dock or on the shoreline Fish on a boat (limited availability)

Do you require a hotel room for Friday night (no smoking allowed)? Yes No

Emergency Contact: _____

Relationship to Client: _____ Phone: _____

Guest/Caregiver Information (limit one per client)

Name: _____

Email: _____ Cell Phone: _____

COVID-19 Health Policy

Please read the following Event Health Policy carefully before signing and submitting your application.

The health and safety of our clients, volunteers, staff, and contracted support during the ongoing COVID-19 pandemic is of the highest priority to the Board. Due to the high transmission of the COVID-19 virus in a majority of counties in South Carolina, including Clarendon County where the Santee Blind Fishing Event will be held, the following requirements must be met by all attendees at the event:

- All registrants will be required to attest to being maximumly vaccinated or present a negative COVID test from the past 48 hours before attending any event functions.
- Registrants will have their temperature taken and be asked to verbally answer a health questionnaire prior to attending any event functions. Those questions will include:
 - Are you experiencing any symptoms of fever, chills, cough, shortness of breath, fatigue, aches, new loss of taste or smell, sore throat, unusual congestion or runny nose, or nausea?
 - Have you been exposed to anyone with COVID-19 in the last 2 weeks?
 - Have you traveled internationally in the last month?
 - Have you received a COVID-19 vaccine (and booster, if eligible)?
- All registrants will be required to wear a surgical or N95 mask while participating in indoor or close-contact event functions, including riding the group bus. Masks are optional when outdoors. All registrants are encouraged to wear masks outdoors when social distancing is not practical (i.e. – while on a boat).

Lions Vision Services reserves the right to modify these guidelines based on the most recent recommendations from the CDC and the transmission rate of the COVID-19 virus at the time of the event.

Do you and your guest attest that you have read, understand, and agree to comply with these public health policies with a positive demeanor throughout the duration of event functions?

Yes No

Please list and explain any dietary restrictions for you and your guest:

Please list and explain any other general notes or information that may be necessary for us to accommodate or be prepared for during the event (i.e. – allergies, special accommodations needed, etc.):

Media Release

LVS wants you to be informed of our intent to use your story, quotes or photographs, letters and media that may contain your image or information. LVS uses client stories in an online website, internal and external newsletters, program pamphlets, donation appeals, grant requests and other materials.

I hereby give LVS permission to use general interest information, quotes, photographs of any minor and/or myself named below for publicity, promotion, news releases, videos, and web use of LVS. This might also apply to the written composition or visual art of the minor and/or myself if it is published.

I hereby release and discharge LVS from any and all claims arising out of the use of the general interest information/quotes/photograph that I or any minor child(ren) listed may have in this regard.

I have had the opportunity to read and consider the contents of this authorization and agree with the purpose of this permission.

Yes No

General Release/Liability

I understand and agree that I will be participating in this event at my own risk and I do hereby certify that: Lions Vision Services, their employees, any and all volunteers involved in this event, including volunteer boat owners and/or operators, and volunteer providers of emergency medical services, are not liable for any personal injuries or losses that may occur as a direct, or indirect, result of my participation in this event.

I have read and agree to the above release.

Signature

I have read this application in its entirety and attest that it is true, accurate, and complete to the best of my knowledge.

Print Client Name

Client Signature

Print Guest Name

Guest Signature

This application was read to me/prepared by: _____ Date: _____

Return Applications to:
Lions Vision Services
234-C Outlet Pointe Blvd.
Columbia, SC 29210

Application Deadlines:
03/21/22 at noon (for those needing hotel rooms)
04/08/22 (for those not needing hotel rooms)
**Incomplete applications will be returned.*