

## **Camp BEE Staff Agreement & Acknowledgment – 2026**

By accepting employment or a staff position with Camp BEE, I acknowledge and agree to the following terms:

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### **1. Disclosure of Medical & Personal Information**

I agree to fully and truthfully disclose any information that may impact my ability to safely and effectively perform my role at Camp BEE, including but not limited to:

- Relevant medical conditions or diagnoses
- Physical limitations or accessibility needs
- Allergies or medical conditions requiring emergency intervention
- Medications that may affect alertness, stamina, or job performance
- Any accommodations needed to perform essential job functions

I understand that this information will be used solely to support staff safety, camper safety, and overall camp operations.

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### **2. Duty to Report Concerns & Changes**

I agree to immediately inform Jordan LeVan and Mikayla Treynor of:

- Any change in my medical status that may affect my ability to work safely
- Any safety concerns involving campers, staff, or the camp environment
- Any incidents, conflicts, or concerns involving campers or families during camp
- Any situation in which a camper's safety, well-being, or dignity may be compromised

Failure to report such concerns may result in removal from my position.

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### 3. Assumption of Risk & Liability Waiver

I understand that participation in Camp BEE activities may involve inherent risks, including but not limited to physical injury, illness, exposure to allergens, and other medical emergencies.

I voluntarily assume all such risks associated with my role as a Camp BEE staff member and release and hold harmless Camp BEE LLC, its owners, staff, volunteers, and affiliates from any liability for injury, illness, or other harm arising from my participation, including travel to and from camp, except in cases of gross negligence or willful misconduct.

I understand that I am responsible for my own medical expenses incurred as a result of injury or illness during camp unless otherwise required by law.

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### 4. Privacy, Professional Boundaries & Communication

I agree to uphold professional boundaries at all times, including:

- Not sharing personal phone numbers, email addresses, or social media accounts with campers or families
- Not requesting or sharing room numbers, hotel floors, or rental property locations
- Maintaining confidentiality of camper, family, and staff information in accordance with Camp BEE policies

I understand that all communication with families must follow Camp BEE's established protocols.

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### 5. Staff Conduct & Expectations

I understand that:

- Camp BEE policies, procedures, and values—including neurodiversity-affirming care—must be followed at all times
- Professional, respectful, and ethical conduct is required in all interactions

- Camp BEE reserves the right to dismiss any staff member for policy violations, safety concerns, failure to disclose required information, or conduct inconsistent with Camp BEE's mission
  - In the event of dismissal, compensation may be forfeited as outlined in staff contracts or agreements
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## 6. Accuracy & Truthfulness Acknowledgment

I confirm that all information I have provided to Camp BEE is accurate, complete, and truthful to the best of my knowledge, and that no relevant information has been omitted or withheld. I understand that failure to provide accurate or complete information may result in immediate termination of my role with Camp BEE.

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## 7. Legal Terms

- **Governing Law:** This agreement shall be governed by the laws of the state in which the camp is held, without regard to conflict of law principles.
- **Severability:** If any provision of this agreement is deemed invalid or unenforceable, the remaining provisions shall remain in full force and effect.
- **Entire Agreement:** This document represents the entire agreement between Camp BEE LLC and the staff member regarding participation and employment at Camp BEE.