

Cedar Springs Camp - MINOR 2017

WAIVER AND RELEASE FROM LIABILITY

(TO BE COMPLETED BY PARTICIPANT)

This agreement is made this _____ day of _____, 2016 between Cedar Springs Camp and _____ ("Participant")

- Subject.** Participant recognizes and expressly agrees that participating in any adventure, sport or activity associated with the out-of-doors is an inherently dangerous activity. Further, Participant recognizes that certain safety precautions must be followed, yet even strict adherence to those procedures does not guarantee nor does Cedar Springs Camp guarantee Participant's safety.
- Waiver and Release from Liability.** Participant understands that Cedar Springs Camp assumes no responsibility for injuries or illnesses that Participant may sustain, a) as a result of Participant's physical condition, b) resulting from Participant's participation in the activity, c) as a result of another participant's or third person's actions, or d) as a result of participant's use of Cedar Springs Camp facilities, field, and/or equipment in connection with this activity.
The Participant releases and agrees to hold harmless, defend and indemnify Cedar Springs Camp and its directors, officers, employees and agents from and against any and all claims for personal injury (including loss of life) and all other losses or damages (except those caused entirely by the gross negligence or intentional conduct of Cedar Springs Camp) that the Participant may suffer as a result of his or her participation and /or enrollment in Cedar Springs Camp activities.
- Medical Consent.** Participant grants permission to Cedar Springs Camp and its employees and agents to take the Participant to a licensed physician for medical treatment, emergency surgery, or hospitalization if Participant becomes ill, sustains an injury, or otherwise requires medical treatment or attention and Cedar Springs Camp is unable to contact the Emergency Contact listed by Participant. The Participant gives consent to any licensed physician to administer drugs or medicine or to perform such medical procedures as that physician determines necessary for the relief of pain and to preserve the Participant's life or health. Participant further authorizes Cedar Springs Camp to give first aid, CPR or other treatment by a qualified staff member to Participant.
- Property Loss.** Participant understands and agrees that Cedar Springs Camp is not responsible for personal property that is lost, damaged, or stolen in connection with this activity.
- Binding Effect.** This Agreement shall be binding upon Participant, his or her heirs, estate, successors, and legal representatives.
- Entire Agreement.** This Agreement represents the entire agreement between the parties. This Agreement shall not be modified or amended except by an agreement in writing signed by both parties.
- Acceptance.** If any portions of this waiver and release are held to be invalid, Participant agrees the remaining terms shall continue to be in full legal force and effect. Participant understands and agrees that this Waiver and Release is binding upon me and my heirs, estates and legal representatives.

Photo Release: I grant Cedar Springs Camp the absolute right to copyright, re-use, publish and republish by any medium, including electronically, any photos of my child or in which they may be included, that may be taken while participating in Cedar Springs Camp activities. Yes: _____ No: _____

Please list any allergies your child may have:

PLEASE READ CAREFULLY. THIS DOCUMENT CONTAINS A RELEASE AND WAIVER OF LIABILITY.

I have read and voluntarily signed this Waiver and Release of Liability.

Parent Signature

Date