

Participant Agreement - Signature Required

Name: _____ For the Year of: _____

I acknowledge that participation in any of this **year's** events, may involve risk to the Participant (and to the Participant's parents or guardians, if Participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage, and financial damage.

With regard to events organized for minors, I also understand that the events this **year** will include participation by adults in children's activities which also carries the potential for injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage, and financial damage.

In consideration for the opportunity to participate in this **year's** events, the Participant (or parent/guardian if Participant is a minor) acknowledge and accepts the risks of injury associated with participation in and transportation to and from events.

The Participant understands that specific activities included in the events may include, but are not limited to, low ropes team building, zip-line, tree climbing, water sports such as swimming, boating, water slide, winter activities such as sledding, snow ball fights, large group games such as capture the flag, ultimate Frisbee, kickball, and nature activities such as sleeping in the tree bus, hiking and camp fires.

The Participant (or parent/guardian) accepts personal financial responsibility for any injury or other loss sustained during any event this **year** or during transportation to and from an event, as well as for any medical treatment rendered to the Participant that is authorized by Chautauqua Hills Camp/Ministries* or its agents, volunteers, or any other representatives.

Further, the Participant (or parent/guardian) releases and promises to indemnify, defend, and hold harmless Chautauqua Hills Camp/Ministries* or its agents, volunteers, or any other representatives for any injury arising directly or indirectly out of any event or transportation to and from an event, whether such injury arises out of the negligence of Chautauqua Hills Camp/Ministries*, the Participant, or otherwise.

The Participant (or parent/guardian) gives consent to Chautauqua Hills Camp/Ministries* to photograph and record images/sounds to be used in promotional materials.

The Participant (or parent/guardian) agrees to comply with camp rules and procedures and understands that failure to comply may result in the Participant being dismissed from the Activity without refund and agrees that transportation from the event will be the responsibility of the Participant (or parent/legal guardian).

Signature of Participant (if 18 or older): _____ Date: _____

Signature of Parent/guardian (if under 18): _____ Date: _____

Youth Camper Agreement - Signature Required

I understand the importance of, and will adhere to, camp safety regulations and the directions given to me by camp leaders so they can provide me and all campers with a safe, pleasant, and memorable camp experience. I will be sure to give all medications to the nurse. I understand that if I fail to follow camp rules, I may be sent home.

Signature of camper _____ Date: _____

Dear Participant,

We apologize for having to require waivers now. We want to insure you that we in no way look on this as an excuse to be slack in safety at C.H.C. We are constantly monitoring and updating our safety procedures and equipment. If you have further questions, please let us know. Thank you for your help.

Chautauqua Hills Camp/Ministries*

* Due to reclassification of our legal definition of the ministry, there is a possibility of a name change.