

CAMP LURECREST RELEASE OF LIABILITY FORM

2 ADULTS WITH MINOR PARTICIPANTS

CAMP LURECREST MINISTRIES hereinafter referred to as "CLM" requires a signature for all attendees of the Camp. IN CONSIDERATION of attending CLM, I acknowledge, appreciate, and agree that:

1. Attendance and Activities at CLM may include but is not limited to basketball, swimming, strenuous competition games, paint ball, ropes course, tubing behind a motorized watercraft, rope swing, activities at the lakefront, night games, frisbee golf, hiking, volleyball, and other camp related sports and activities. I realize that unanticipated and unexpected dangers may arise during and associated with the above activities. I voluntarily agree to accept any and all risks of injury, death or damages of any nature resulting directly or indirectly from participation in these activities.
2. I understand that attendance at CLM and participation in any CLM activities can be physically and mentally intense. I understand the rules of play and will comply with all rules and regulations. If I observe any unusual or unnecessary hazard during my participation, I will bring such to the attention of the nearest official as soon as practical; and,
3. I, for myself and on behalf of my heirs, assigns, personal representative and next of kin, HEREBY RELEASE AND HOLD HARMLESS CAMP LURECREST MINISTRIES, their officers, officials, agents and/or employees("releases"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss of damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASEE OR OTHERWISE, except that which is the result of gross negligence and/or wanton misconduct.
4. I understand and agree that this Release of Liability Agreement covers attendance and each and every activity and event in which I participate hereafter.
5. I assume the risk that my child, myself, and other family members may be exposed to or infected by contagious illnesses (such as streptococcus, influenza, and COVID-19) by attending any camps and activities at CLM, and that such exposure or infection may result in personal injury, illness, permanent disability or death. On my behalf, and on behalf of my child, I hereby release, covenant not to sue, discharge, and hold harmless CLM, its employees, volunteers, agents, and representatives, of and from the claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto.

Furthermore this form releases CLM to photograph and/or use photographs of attendees for use in its publications, advertising, promotional purposes, internet, and/or visual presentations which inform people of the services and activities of CLM. The signature provided confirms Agreement to Attend, Participate, Assumption of Risk, and Release Form in order to attend CLM and to participate in any CLM activity.

This is to certify that I, as a parent/guardian with legal responsibility for this participant, do consent and agree not only to his/her release of Camp Lurecrest Ministries and all other releases but also to release and indemnify the Releases from any and all liabilities incident to his/her involvement in these programs for myself, my heirs, assigns and next of kin.

PARENT/GUARDIAN/ADULT PARTICIPANT #1

ADULT PARTICIPANT #2

Name

Name

MINOR PARTICIPANTS

Name

Age

Relationship to Adult Participant #1

Name

Age

Relationship to Adult Participant #1

Name

Age

Relationship to Adult Participant #1

Name

Age

Relationship to Adult Participant #1

Name

Age

Relationship to Adult Participant #1

Name

Age

Relationship to Adult Participant #1

Parent or guardian must read this form and sign below for participants under 18 years of age. This is to certify that I, as a parent/guardian with legal responsibility for this participant, do consent and agree not only to his/her release of CLM and all other releases but also to release and indemnify the Releases from any and all liabilities incident to his/her involvement in these programs for myself, my heirs, assigns and next of kin.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PARENT/GUARDIAN/ADULT PARTICIPANT #1

Signature

Phone Number

Date

ADULT PARTICIPANT #2

Signature

Phone Number

Date