



Informed Consent and Assumption of Risk

READ BEFORE SIGNING

Participant's Name: _____ DOB: _____
(please print)

IN CONSIDERATION of being permitted to participate in any way at Ranger Lake Bible Camp, operated by One Hope Ministries of Canada (hereafter known as camp), I acknowledge, understand, and agree:

1. Participation in activities could result in personal injury. Despite precautions taken by the camp, accidents and injuries may occur. By signing this form, I assume all risks related to the use of any and all spaces used by the guest group.
2. To release from responsibility the camp, including all missionaries, full-time and part-time, paid or volunteer, and the facilities used from any cause of action, claims, or demands now, and in the future that might arise out of my participation in activities at the camp or from the physical risks associated with the activities.
3. I accept all risks relating to such activities including personal injury such as: cuts, sprains, scrapes, bruises, fractures, broken bones, concussions, death, or any personal property damage/loss, which may occur on the camp premises. **I understand these risks and will not hold the camp liable for any such injury.**
4. Furthermore, I agree to obey all camp rules and take full responsibility for my behaviour in addition to any damage I may cause to the facilities owned by the camp.

I have read this *Informed Consent and Assumption of Risk Agreement*, fully understand its terms and the risks I am assuming by signing it, and sign it freely and voluntarily.

Participant Signature (13 years and older) _____ Date _____ Phone # _____

(Address, City, Province, Postal Code)

FOR PARTICIPANTS OF MINORITY AGE

(under age 18 at time of registration)

This is to certify that I, as parent/guardian with legal responsibility for this participant, have read this *Informed Consent and Assumption of Risk Agreement*, fully understand its terms, and that I have given up substantial rights by signing it, and sign it freely and voluntarily.

Parent/Guardian's Signature _____ Date _____ Phone # _____

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