#### **2019 CLWPA**



## **Complete Liability Waiver and Participation Agreement**

Read this document completely before signing. Its effect is to release Camp Hope of Southwest Washington ("Camp Hope") and its representatives from any liability resulting from your participation or your minor child's participation in activities at and use of Camp Hope, to waive all claims for damages or losses against Camp Hope and its representatives that may arise from such activities and use, to permit Camp Hope to consent to medical treatment on your or your minor child's behalf, and to permit Camp Hope to publish photographs and videos of you.

In consideration of Camp Hope, located at 12800 Roper Rd., Battle Ground, Washington 98604, permitting me or my minor child to participate in activities at or use of Camp Hope, I, or I on behalf of my minor child,

(printed name of participant/camper)	
and, if applicable, (printed name of parent or legal guardian)	

hereby assume all of the risks of participation in activities at or use of Camp Hope, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of Camp Hope and its representatives, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of the possible liability without fault, or from transportation to or from Camp Hope. I understand that participation in activities at or use of Camp Hope is voluntary, and I acknowledge that I am exercising my own free choice to participate voluntarily or let my minor child participate voluntarily in such activities and use, and am promising to take due care during such participation.

I acknowledge and understand the nature of activities that I or my minor child will be participating in have natural and/or manmade potential hazards such as, but not limited to, uneven terrain, trees, branches, mounds, rivers, buildings, and other such structures. I am aware of the risks which may be associated with any natural and/or manmade potential hazards and with general recreational activity, including the risks of bodily injury, death, or damage to property which may occur from known or unknown causes.

Also in consideration of Camp Hope permitting me or my minor child to participate in activities at or use of Camp Hope, I, or I on behalf of my minor child, hereby voluntarily make this agreement for myself or my minor child and my or my minor child's executors, administrators, heirs, next of kin, successors, and assigns, and I specifically: (Next Page)

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- waive, release, and discharge Camp Hope and its individual directors, officers, agents, employees,
  volunteers, representatives, and any other persons or entities acting on its behalf, and the successors
  and assigns from any and all liability of every kind, including but not limited to liability arising from the
  negligence or fault of the entities or persons released, for my or my child's death, disability, personal
  injury, property damage, property theft, or actions or injury of any kind which may hereafter occur to me
  or my child;
- indemnify, hold harmless, and promise not to sue the entities or persons released above from any and all liabilities or claims made as a result of participation in activities at or use of Camp Hope, whether caused by the negligence of Camp Hope or any of the persons or entities being released;
- agree that I will be solely responsible for any costs arising out of any bodily injury or property damage sustained through my or my minor child's participation in normal or unusual activities at or associated with Camp Hope;
- give consent for Camp Hope staff members to authorize necessary hospitalization and medical treatment for me or my minor child, including but not limited to injections, anesthesia, surgery, and medication;
- represent that I have current medical insurance coverage for me and for my minor child and agree to be responsible for any and all billings and debts incurred with respect to such medical treatment or services; and
- represent that I have disclosed to Camp Hope any medical information that Camp Hope needs to know to assist in obtaining any necessary care.

Do you have any allergies? Bee stings, hay fever, etc.?	yesno
If yes, please explain	
This Complete Liability Waiver and Participation Agreemen and waiver to the maximum extent permissible under application.	• •
have had sufficient time to review and seek explanation carefully read them, understand them fully, and agree to this Complete Lia	o be bound by them. After careful deliberation, I
Participant/Camper's Signature	Date
Participant/Camper's Phone Number: Emergency Contact: Emergency Contact's Phone Number:	Relationship:
If participant/camper is under the age of 18, his or her	parent or legal guardian must also sign: warrant
and represent that I am the parent or legal guardian of the such capacity, I have read and I understand the provisions participant/camper participating in activities at or use of Ca individually and on behalf of the participant/camper, to the foreign activities are participation and on behalf of the participant/camper, to the foreign activities are referred to above from all liability, loss, of imposed upon said parties because of any defect in or lack or entities on behalf of the participant/camper and the pare	of this document, I consent to the mp Hope, and I fully enter into and agree, terms of the above Complete Liability Waiver and narmless and indemnify each and all of the released cost, claim, or damage whatsoever which may be of such capacity to so act and release said persons
Parent/Guardian's Signature	 Date

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# - Release for Publication or Opt-Out -

in a variety of media, including but not limited to webpages, social media, brochures, and or materials, and hereby release and hold Camp Hope and its representatives harmless for ar Camp Hope or its representatives related to such publication and use?	ther printed
Yes, I do give my consent to Camp Hope to use photo and/or video images taken of child in a variety of media, including but not limited to webpages, social media, brochures, a materials. I hereby release and hold Camp Hope and its representatives harmless for any Camp Hope or its representatives related to such publication and use. This form will apply to my minor child's tenure at Camp Hope and will not need to be updated unless I so desire.	and other printed claims against
No, I do not give my consent to Camp Hope to use photo and/or video images of m	ie or my minor child
Signature of Participant/Camper, if 18 or Older, or Parent/Guardian Date	