CAMP FOR ALL FOUNDATION
CAMP RELEASE FORM

A. This agreement must be read and signed for you/your child to be eligible to attend _______________ at Camp For All.

Your/Your Child’s Name: __________________________________________

I. PARTICIPATION CONSENT

I understand and certify that my/my child’s participation in _______________ and its activities at Camp For All is completely voluntary. I have familiarized myself with _______________ program and activities at Camp For All in which I/my child will be participating. I recognize that certain hazards and dangers are inherent in these activities, which may include, but not limited to, the activities of horseback riding, high and low elements ropes course, swimming, archery, riflery and canoeing. I acknowledge that although _______________ and Camp For All have taken safety measures to minimize the risk of injury to camp participants, _______________ and Camp For All cannot insure or guarantee that the participants, equipment, premises or activities will be free of hazards, accidents or injuries. I recognize and have instructed my child in the importance of knowing and abiding by the rules, regulations, and procedures for _______________ at Camp For All. Further, I have received approval from a doctor authorizing me/my child to participate in the _______________ activities at Camp For All. I also agree to inform _______________ of any activities in which I/my child may not participate.

II. LIABILITY RELEASE

I, the undersigned, understand that occasionally accidents occur during camp activities and that participants may sustain serious personal injury and property damages as a consequence thereof. Knowing the risks of camp activities, nevertheless, I agree to assume those risks and by signing this liability release, I intend to legally bind myself, my minor children, my heirs, executors, and administrators. I hereby release and forever discharge _______________ and Camp For All and any of their officers, directors, employees, and agents from all claims, causes of action or damages arising out of any injury, illness, or loss of any kind, known or unknown, including but not limited to injuries to property or person, to me/my child during or related to my/my child’s attendance at _______________ at Camp For All.

III. MEDIA RELEASE

I hereby give _______________ and Camp For All the right to interview and/or to take photographs, audio or audio-visual recordings of me/my child to be used in promotional, educational or fundraising materials including, but not limited to videotapes, pamphlets and brochures. I understand my/my child’s name may be used in connection with these materials. By signing this media release, I intend to legally bind myself, my minor children, my heirs, executors and administrators.

I hereby release _______________ and Camp For All and its officers, agents and employees from all liability connected with the taking and use of these materials as is authorized by _______________ and Camp For All. In addition, I waive all rights, interest or claims for payment in connection with any exhibition or release of these materials. This consent is voluntary, and I give it in the interest of public information, education, the furtherance of the goals of these institutions, or other lawful purposes. I acknowledge that I have legal authority to sign this form on behalf of the minor whose name is mentioned above.

X________________________________________________
Parent/Guardian/Self Signature  Date

________________________  __________________________
Printed Name

________________________  __________________________
Address        City     State     Zip

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