Camp For All Foundation: Camp Liability Release Form
This agreement must be read and signed for you/your child to be eligible to attend Camp LIFE at Camp For All.

Your Name: _________________________________________________________________________________

I. PARTICIPATION CONSENT
I understand and certify that my/my child’s participation in Camp LIFE and its activities at Camp For All is completely voluntary. I have familiarized myself with Camp LIFE 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 Camp LIFE and Camp For All have taken safety measures to minimize the risk of injury to camp participants, Camp LIFE 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 Camp LIFE at Camp For All. Further, I have received approval from a doctor authorizing me/my child to participate in the Camp LIFE activities at Camp For All. I also agree to inform Camp LIFE 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 Camp LIFE 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 Camp LIFE at Camp For All.

III. MEDIA RELEASE
I hereby give Camp LIFE 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. Camp LIFE and Camp For All shall have the right to use photographs or other images of me/my child in promotion, educational or fund-raising materials. I acknowledge that Camp LIFE or Camp For All shall have all rights of copyright in and to such photographs and videotapes and may use such copyright fully. I also hereby release Camp LIFE 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 Camp LIFE 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.

Attendee Signature __________________________________________________________________________

Parent/legal guardian signature ________________________________________________________________

Date ___________________________ Camp/Group Affiliation Camp LIFE/Family Support Network

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