RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

In consideration of participating the CAMP OF CHAMPIONS, I represent that I understand the nature of this activity and that I am qualified, in good health, and in proper physical condition to participate in such activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the activity. I fully understand that this activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of other participating in the event, the conditions in which the event takes place, or the negligence of the "Releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and responsibility for losses, costs, and damages I incur as a result of my participation in the activity

time; and I fully accept and assume	all such risks and responsibilit	ty for losses, costs, and damages I incur as a result of	my participation in the activity
administrators, directors, agents, off which the activity takes place, inclu considered one of the "Releasees" h or in part by the negligence of the R	ficers, volunteers, and employed ding, but not limited to: herein) from all liability, claims Releasees, or otherwise, includin	RPRISES, LLC, DBA DAN ALCH'S CAMP OF CH ces, other participants, any sponsors, advertisers, and cost, demands, losses, or damages, on my account caused ing negligent rescue operations and further agree that is a claim against any of the Releasees, I will indemnify	owners and lessors of premises on (each dor alleged to be caused in whole if, despite this release, waiver of
		may incur as the result of such claim.	, save, and noid narmiess each of
given up substantial rights by signing	ng it and have signed it freely a sility to the greatest extent allow	UMPTION OF RISK, AND INDEMNITY AGREEM and without any inducement or assurance of any nature wed by law and agree that if any portion of this agreer	e and intend it to be a complete
Printed Name of Participant		Date	
	P.A	ARENTAL CONSENT	
on the minor's account caused or all rescue operations, and further agree Releasees, I WILL INDEMNIFY, S damage, or cost any Releasee may it	leged to have been caused in we that if, despite this release, I, to SAVE AND HOLD HARMLES incur as the result of any such coor guardian of a student, it is not such control to the such	ny option to consult a physician for assurance of prop	otherwise, including negligent aim against any of the above attorney fees, loss liability,
Printed Name of Parent/Legal Guard	dian	Date	
Variable Control of the Control of t			
Signature of Parent/Legal Guardian		Date	
	CONSENT FOR MEDIC	CAL TREATMENT OR SURGICAL CARE	
ambulance service or transportation when deemed necessary in the ever	dba Dan Alch's Camp of Cha to a hospital) and will allow a at that I cannot be contacted in	ampions to take the necessary steps regarding medic authorized hospital faculty and staff to treat my child mmediately. I understand that all medical expenses, at Alch Enterprises, LLC, dba Dan Alch's Camp of C	in the event of an illness or injury including emergency services are
Witness Signature	Date	Parent/Legal Guardian Signature	Date