## **SUMMER CAMP LIABILITY WAIVER**

This Summer Camp Liability Waiver Form is designed to ensure that participants acknowledge and accept the inherent risks associated with participating in the activities offered at the camp.

<i>PARTICIPANT</i>	INFORMATION
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Name:	Date:		
Address:	Booking ID (if a	applicable):	Phone:
	Email:		
Emergency Contact Name:	Emergency Contact No:	; <u></u>	
I hereby acknowledge and agree to the	he following terms and conditions for my chi camp activities:	ild's participation in th	e summer
of the risks associated with my c camp activities involve certain in a. The risk of injury resulting fro	nt or legal guardian of the participant, I he hild's participation in the summer camp as therent risks, including but not limited to: tom participation in physical activities and s s during outdoor adventures such as playing	ctivities. I understand	l that summer
c. The risk of illness or injury	from exposure to environmental factors		
emergency if they are unable to expenses incurred as a result of s.  3. Release of Liability: I hereby r directors, employees, volunteers, action arising out of my child's p.  4. Indemnification: I agree to inder directors, employees, volunteers, arising out of my child's participate.  5. Photographic Release: I grant per and for the use of such materials.  6. Supervision and Safety: I under ensure the safety of all participate all times. I trust in the camp's safety.	release, waive, discharge, and covenant in and agents from any and all liability, claimarticipation in the summer camp activities manify and hold harmless, and agents from any and all liabilities or ation in the summer camp activities. The ermission for photographs or videos of my for promotional purposes without any content of the third while the camp staff will must during activities, it may not be possible afety protocols and procedures to mitigate follow all the safety guidelines and instr	to be responsible for not to sue the camp of ims, demands, actions is.  claims made by third  y child to be taken dura mpensation to me.  hake every effort to see to provide constant see to provide constant see risks to the best of	organizers, its s, or causes of its parties ring the camp supervise and supervision at their ability. I
If my child is under th	ne age of 18, I have read and agreed to this w	aiver on their behalf.	
	d understand its contents. I am aware that by on behalf of my child. I voluntarily sign this behalf of my child.		
Parent's Name	Parent's Signature	Date	