Release and Waiver of Liability and Indemnity Agreement

(Read Carefully Before Signing)

In consideration of being permitted to participate in any way in the	Program indicated below
and/or being permitted to enter for any purpose any restricted area (here in defined as any	area where in admittance to the general
public is prohibited), the parent(s) and/or legal guardian(s) of the minor participant named l	below agree:
$\textbf{1.} \ The \ parent(s) \ and/or \ legal \ guardian(s) \ will \ instruct \ the \ minor \ participant \ that \ prior \ to \ participant \ that \ prior \ $	icipating in the below
activity or ever	nt, he or she should inspect the facilities
and equipment to be used, and if he or she believes anything is unsafe, the participant sho	ould immediately advise the officials of
such condition and refuse to participate. I understand and agreed that, if at any time, I feel	anything to be UNSAFE; I will
immediately take all precautions to avoid the unsafe area and REFUSE TO PARTICIPATE	further.
2. I/WE fully understands and acknowledges that:	
(a) There are risks and dangers associated with participation in	events and
activities, which could result in bodily injury partial and/or total disability, paralysis and deat	
(b) The social and economic losses and/or damages, which could result from these	
could be severe.	, nene and aangere accombed accre,
(c) These risks and dangers may be caused by the action, inaction or negligence o	f the participant or the action, inaction or
negligence of others, including, but not limited to, the Releases named below.	if the participant of the action, maction of
5.5	
(d) There may be other risks not known or are not reasonably foreseeable at his tin	ne.
3. I/WE accept and assume such risks and responsibility for the losses and/or damages fol	llowing such injury, disability, paralysis or
death, however caused and whether caused in whole or in part by the negligence of the Re	
4. I/WE HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the	
facility used by the participant,	including its owners, managers
promoters, lessees of premises used to conduct the	
and event inspectors, underwriters, consultants and others who give recommendations, dir	rections or instructions to engage in risk
evaluation or loss control activities regarding the	
facility and each of them, their directors, officers, agents, employees, all for the purposes h	
ALL LIABILITY TO THE UNDERSIGNED, my/our personal representatives, assigns, execu	
ALL CLAIMS, DEMANDS, LOSSES OR DAMAGES AND ANY CLAIMS OR DEMANDS THE	
INJURY, INCLUDING BUT NOT LIMITED TO THE DEATH OF THE PARTICIPANT OR DA	
OF OR RELATING TO THE EVENT(S) CAUSED OR ALLEGED TO BE CAUSED IN WHO	DLE OR IN PART BY THE NEGLIGENCE
OF THE RELEASEE OR OTHERWISE.	
5. I/WE HEREBY acknowledges that THE ACTIVITIES OF THE EVENT (S) ARE VERY DA	
serious injury and/or death and/or property damage. Each of THE UNDERSIGNED also each	xpressly acknowledges that INJURIES
RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPER	ATIONS OR PROCEDURES OF THE
RELEASEES.	
6. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, was	aiver, and indemnity agreement is
intended to be as broad and inclusive as is permitted by the law of the Province or State in	which the event is conducted and that if
any portion is held invalid, it is agreed that the balance shall, notwithstanding continue in fu	
7. On behalf of the participant and individually, the undersigned partner(s) and/or legal guarantees.	-
this Waiver and Release. If, despite this release, the participant makes a claim against any	
legal guardian(s) will reimburse the Release for any money, which they have paid to the pa	
harmless.	and the angles of the second state of the seco
I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AN	ID INDEMNITY AGREEMENT FILLY
UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RI	·
SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE,	•
AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE O	
	FALL LIABILITY TO THE GREATEST
EXTENT ALLOWED BY LAW.	
Event	
Parent or Guardian Signature (if minor)	

Printed Name of Participant		
Address of Participant		
		
XCAMP Emergency Medical Rele	ease & Liability Waive	er -
The following completed and sign accompany the enrollment Form.	ed Emergency Medica	l Release & Liability Waiver must
APPLICANT/ PARTICIPANT		
Camper's Name		
Birth date		
Street Address		
City	State	Zip
EMERGENCY INFORMATION		
Father's Name		
Home Phone	Bus. Phon	ne
Mother's Name		
Home Phone		
In an EMERGENCY when parent		
Name		
Home Phone	Bus Phone	e
Name		
Home Phone	Bus Phone	e
MEDICAL		
Allergies:		
Other Medical		
Conditions:		
Physician:	Phone	

THIS AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT MUST BE COMPLETED BEFORE A CAMPER BEGINS PARTICIPATION.