

Parent/Guardian Signature \_

Please sign if attending Middle School or Teen Camp, and you wish for your child to participate in activities as defined in Section 3 (The Programs).

This MUST be signed if your child is attending an Adventure Camp, or Waterski Camp.

If attending a Primary or Junior Camp, please see Page 2.

## PARTICIPANT AGREEMENT AND ACKNOWLEDGEMENT

## PARTICIPANT AND PARENT OR GUARDIAN UNDERSTAND AND AGREE THAT:

- 1. **FITNESS** Camp Ghormley ("CG" herein, and which shall include its parent organization, and the officers, agents, servants and employees of both) cannot make a determination of a Participant's fitness for an event in the adventure and related programs; rather, the Participant represents to CG and verifies that he/she is physically and mentally fit and ready for an event. It is Participant's duty to discuss all medical conditions and/or physical activity concerns with a CG Staff member prior to participation in all activities. All information given will be held in confidence to the extent practicable.
- 2. **DRESS** All Participants are required to wear closed toe, tie-on shoes. For the sake of both *safety* and *modesty*, please come dressed appropriately by wearing comfortable clothing, including a shirt that can be tucked in. No tank tops, excessively loose clothing, shirts with bare backs, or tube tops should be worn. Long pants are suggested, but if you wear shorts, make sure they are long shorts. Please come prepared to remove all jewelry, (including body jewelry). For specific events (such as water activities), alternate clothing may be required.
- 3. **THE PROGRAMS** In consideration of being permitted to participate in the adventure course of CG, the Participant recognizes that the program may involve a variety of activities including, but not limited to, **LOW AND HIGH CHALLENGE COURSE ELEMENTS**, **OFF-SITE WATER BASED ACTIVITIES**, backcountry events, mountain biking, climbing, or similar, and is aware of and accepts the physical and emotional risks inherent in the participation in such activities and in the use of CG equipment and facilities.
- 4. **PARTICIPATION** The Participant is aware that the nature of the Program requires physical and mental challenges and is willing to participate, and has been advised of the voluntary nature of the program. Participant understands that he/she may decline to participate in this program, or any part of this program, if he or she so chooses. The Participant understands and acknowledges that his or her failure to disclose relevant information or failure to follow the directions of the CG staff may result in harm to the Participant and/or others during an event. The Participant approves and releases to CG the use for any purpose of any photographic or video recorded image of the Participant listed below.
- 5. **INJURY/INDEMNITY** Participant and his/her parent(s) acknowledge that activities related to the Adventure Program are physically and mentally challenging, and participant and his/her parent(s) acknowledge that the participant and his/her parent(s) are willing to assume such risks. Participant and his/her parent(s) understand and acknowledge that his/her failure to disclose relevant information or to follow the directions of CG Staff may result in harm to the participant and/or others. <u>IN THE EVENT OF AN INJURY TO PARTICIPANT AS A RESULT OF HIS/HER PARTICIPATION AT CG, IRRESPECTIVE OF CAUSE, PAYMENT OF ANY HOSPITAL, MEDICAL, DENTAL AND RELATED COSTS AND EXPENSES IS THE RESPONSIBILITY OF, AND WILL BE PAID EITHER <u>BY PARTICIPANT, OR HIS/HER FAMILY, OR THEIR MEDICAL INSURANCE.</u> The Participant and/or guardian gives permission for transportation to any medical facility or hospital, and to authorize any qualified instructor or medical personnel to render necessary emergency medical care for the Participant listed below in the event of a medical emergency.</u>

A participating Organization, YMCA Camp Dudley, shall receive the same protections under this agreement as CG.

I, the undersigned as Participant, and the parent or guardian of the named voluntarily sign this agreement.	Participant who is under age 18, have read and do	
Participant (print name)	_ Camp Session	
Parent or legal guardian <u>must</u> sign below for any Participant under 18 years of age.		
Parent/Guardian (print name)		



Please sign if attending a Primary or Junior Camp and you wish for your child to participate in the Zipline activity.

If attending any other camp sessions, please see a more comprehensive agreement on the other side of this page.

## ZIPLINE PARTICIPANT AGREEMENT AND ACKNOWLEDGEMENT

## PARTICIPANT AND PARENT OR GUARDIAN UNDERSTAND AND AGREE THAT:

All Participants are required to wear closed toe, tie-on shoes. For the sake of both *safety* and *modesty*, please come dressed appropriately by wearing comfortable clothing, including a shirt that can be tucked in. No tank tops, excessively loose clothing, shirts with bare backs, or tube tops should be worn. Long pants are suggested, but if you wear shorts, make sure they are long shorts. Please come prepared to remove all jewelry, (including body jewelry).

Participant and his/her parent(s) acknowledge that activities related to the Adventure Program are physically and mentally challenging, and participant and his/her parent(s) acknowledge that the participant and his/her parent(s) are willing to assume such risks. Participant and his/her parent(s) understand and acknowledge that his/her failure to disclose relevant information or to follow the directions of CG Staff may result in harm to the participant and/or others. Participant understands that he/she may decline to participate in this activity, or any part of this activity, if he or she so chooses. IN THE EVENT OF AN INJURY TO PARTICIPANT AS A RESULT OF HIS/HER PARTICIPATION AT CG, IRRESPECTIVE OF CAUSE, PAYMENT OF ANY HOSPITAL, MEDICAL, DENTAL AND RELATED COSTS AND EXPENSES IS THE RESPONSIBILITY OF, AND WILL BE PAID BY PARTICIPANT, HIS/HER FAMILY, OR THEIR MEDICAL INSURANCE.

Participant (print name)	Camp Session
Parent or legal guardian must sign below for any Parti	icipant under 18 years of age.
Parent/Guardian (print name)	
Parent/Guardian Signature	Date

640 Lost Lake Road Naches, WA 98937
PHONE: (509) 672-4311 FAX: 877-864-1655 EMAIL: office@campghormley.com