



Activities Participant Agreement & Release of Liability

Participant Name (please print): _____

Parent/Guardian Name (if minor): _____

*Initial below to indicate that you have read, understand and agree to the section following your initials.
Note: Parents/guardians should initial on behalf of the minor participant after discussing each point with them to ensure that both the participant and the parent/guardian understand.*

_____ I acknowledge there are certain hazards and dangers inherent with outdoor activities including, but not limited to, encounters with and injuries or bites from ticks, spiders, scorpions, snakes and/or other insects, reptiles and wild animals.

_____ I recognize and acknowledge that certain hazards and dangers, both physical and mental, are inherent in Central Florida Bible Camp's (CFBC) programs, in particular, but not limited to, the activities of Swimming, Axe Throwing, and Challenge Courses (Low Ropes and High Ropes).

_____ Although CFBC has taken safety measures to minimize the risk of injury to participants, CFBC cannot ensure nor guarantee that the participant's activity site, equipment, and/or activities will be free from hazards, accidents, and/or injuries.

_____ I understand that my participation is voluntary and that I have the right and responsibility to limit my participation in any activity that I believe will compromise my safety, and I agree to notify CFBC staff if I have safety concerns. I understand that CFBC programs are operated on a "Challenge by Choice" basis. This means, each participant will be encouraged to try each activity planned, but is free to choose their own level of participation and will not be forced or coerced to participate in any activity against their will. If I choose to physically participate in any of the activities, I voluntarily assume all risks associated with such participation.

_____ Safety is CFBC's number one priority while conducting its programs and activities. I acknowledge the importance of understanding and abiding by CFBC's rules, regulations, and procedures that are given for the safety of all participants. I further understand that any participant who violates safety rules may be expelled from that activity by the Facilitator, Supervisor or Referee in charge.

_____ I give consent to Central Florida Bible Camp personnel, whether employees or volunteer staff, to treat or seek emergency medical treatment if it is deemed necessary.

_____ I agree to accept financial responsibility for any medical expenses and/or loss of income not covered by my own Insurance Policy that result from my participation in any CFBC activity.

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Central Florida Bible Camp: Activities Participant Agreement & Release of Liability (continued)

_____ I understand and assume all dangers and risks (both known and unknown) associated with my presence or participation in any program or activity and waive, release and discharge Central Florida Bible Camp (CFBC) and its agents, officers, employees, and volunteers from any and all claims or causes of action arising from such presence or participation. I do hereby release CFBC, its agents, officers, employees, and volunteers from any and all liability, even if arising from the negligence of the releases. I do hereby agree to indemnify and hold harmless CFBC its agents, officers, employees, and volunteers for any accidents, injury, loss or damage of property, and from any legal fees that I may ever have as a direct or indirect result of said presence or participation. This release, indemnification, and waiver shall be construed broadly to the maximum extent under applicable law.

_____ My signature on this document is also intended to bind my representatives, administrators, successors, heirs, next of kin and assigns on my behalf.

By signing below, I am agreeing that I have carefully read and agree to all of the sections initialed above.

Participant Signature (Minors must sign)

Date

Guardian/Legal Representative Signature (for minor participant)

Relationship

Date