

HANGING ROCK CHRISTIAN ASSEMBLY, INC.
6988 SOUT STATE ROAD 263
WEST LEBANON, INDIANA 47991
765-893-4581



YOUTH Registration; Agreement for Permission, Waiver and Release, Assumption of Risks, and Indemnification

This document may affect your legal rights, please read carefully. If any portion of this Agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

Name _____

Participant Name (print) _____ Parent / Legal Guardian Name (print) _____

I, the Participant or the Parent/Legal Guardian of participant, being above the age of 18, agree as follows:

I give permission for my child to participate in this Camp Event.

I acknowledge and understand that certain camping activities, including but not limited to: skating, skateboarding, paintball, ropes courses, archery, marksmanship, water sports, horses, zip line, rappelling, rock wall, swimming, ATV and dirt bikes are hazardous and dangerous activities that require strenuous exercise and varying degrees of skill and experience. I understand that these activities can result in serious injury to the person and damage to property and I voluntarily assume any and all risks of loss, damage or injury while on the premises.

I acknowledge that there are risks, hazards and dangers of personal injury, death and disability inherent in entering camp grounds and participating in, or viewing camp activities. I am aware that the usual risks, hazards and dangers of personal injury, death and disability increase when using certain camping equipment and when other persons, whether of the same or different level or experience or skill, are using the same facilities and equipment.

In consideration for my participation, or for the participation of my child or the minor for whom I represent that I am legal guardian, I hereby release and forever discharge Hanging Rock Christian Assembly, INC. and their servants, employees, officers, directors, trustees and all other persons or entities acting on their behalf (collectively referred to as "HRCA"), from any and all claims, actions, damages, liabilities, costs or expenses and attorney fees which are related to, arise out of, or are in any way connected to my child's, or the minor for whom I represent that I am legal guardian's viewing or participation in any camping activities. By digitally signing this Agreement, it is my intention to waive any rights to sue or seek damages from HRCA; except where injury, death or disability results from HRCA gross negligence.

I further agree to indemnify, hold harmless and defend HRCA against any and all claims for damages, costs, expenses or attorney's fees brought by any third party in connection with or arising out of my, or the above-listed participant's involvement or participation. This Agreement shall be effective and binding upon my marital community, estate, heirs, agents, personal representatives and assigns.

I, having the authority to consent for the minor's health care (being over age 18, a parent or legal guardian), do hereby delegate my authority to Consent to said minor's care (named on this web site registration) to HRCA. I grant permission for the caregiver to request and authorize in writing or as otherwise requested by any hospital, or by any physician licensed to practice medicine, any and all examinations, medical treatments, and/or procedures to or for the benefit of the minor, either on or off the premises of the hospital, as may be deemed advisable or appropriate by any physician licensed to practice medicine. I understand however that every effort will be made to contact me in case of such emergency and if possible, before any such medical treatment is administered. My camper's medical information may be shared with appropriate personnel including but not limited to camp staff, programs directors, camp nurses, EMS personnel, Or other medical personnel as deemed medically necessary.

I accept responsibility of medical coverage while at HRCA.

I give Hanging Rock permission to use photos and video of my child taken at camp for promotional materials.

I hereby certify that I am over 18 years of age; I have carefully read the foregoing and acknowledge that I understand and agree to all the terms and conditions. I have had the opportunity to ask any and all questions regarding this Agreement and the effect of the same. I am aware that by signing this Agreement, I assume all risks and waive and release certain substantial rights that I have or possess.

Participant Signature: _____ Date _____

Parent/Legal Guardian Signature: _____ Date _____