

Work Camp Waiver and Release of Liability Form

In consideration for being allowed to participate in any way in a work camp and/or related activities sponsored by The Division for Outdoor Ministries, United Church of Christ, the undersigned:

1. Acknowledges and understands that he/she will be engaging in activities that involve risk of serious injury, including disability and death, severe social and economic losses. These consequences might result not only from his/her own action, inaction or negligence, but also from the actions, inaction or negligence of others during the course of the activities referred to above. Further, the undersigned acknowledges and fully understands that there may be other risks not known or reasonably foreseeable at this time.
2. Assumes all of the foregoing risk and accepts personal responsibility for any damages following such an injury, permanent disability, and death or property damage.
3. Agrees to release, waive and discharge any liability by The Division for Outdoor Ministries, United Church of Christ, their staff, associates, volunteers, their respective heirs, legal representatives, successors, and assigns for any causes of action, claims, demands, damages or expenses on account of or in any way growing out of any and all personal injuries, permanent disability, death, and/or property damage resulting or to result from any activities related to the above-described work camp.
4. States that he/she has carefully read the foregoing release, understands its implications, and signs it as his/her own free act.

Photographs, Video

I Do or Do Not (circle one)

allow photographs and/or video representations of me or my child to be taken for the express purpose of telling stories about the work camp experience and promoting camping experiences in the future.

Signature _____ **Date** _____

I HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT I GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

Printed Name of Participant

Signature of Participant

Date: _____

For Minors under 18 years:

Printed Name of Parent (s)

Signature of Parent (s)

Date: _____

In case of an emergency please supply a contact name and phone number

Name _____ phone number _____