



FORT WILDERNESS

# Acknowledgement of Risks Assumption of Personal Responsibility Waiver & Release of Liability

I (full name) \_\_\_\_\_

desire Fort Wilderness Ministries, to permit me to participate in the following camping program:

- CO-ED Kids' Camp
- Girls' Camp
- Boys' Camp
- Step Up (1 week option)
- Step Up (2 week option)
- Built to Live
- In Depth
- Leadership Lab #1\_\_\_\_#2\_\_\_\_#3\_\_\_\_ (please check one attending)
- Youth Group Trip
- Other \_\_\_\_\_

## IDENTIFICATION OF RISKS

I understand that the Fort Wilderness camp program will be primarily conducted in the outdoors. It will operate in all kinds of weather, in a wide variety of physical settings, and with diverse people. As a result, I further understand that during my participation I may be exposed to unusual risks, hazards, and stresses. Camp activities such as, but not limited to, horseback riding, rock climbing, descending, rappelling, wilderness travel, high and low ropes course activities, swimming, water sports, water travel, snow skiing, climbing walls, caving, biking, backpacking, hiking, and transportation to and from the activity site may result in property damage or severe, maybe even fatal injury. Dangers inherent to lakes & rivers, falling rocks and forces of nature such as darkness, heavy rain, lightning, strong winds, extremes of heat and cold, biting insects, and animals may independently or in combination with my activities cause a serious injury or accident. Stresses may also result from emotional anxiety, interpersonal conflicts, and homesickness. I am also aware that a mistake by another camper could result in injury to myself. I am also aware that other campers may be beginners with very little or no experience.

## ACKNOWLEDGEMENT OF RISKS

I understand that although Fort Wilderness has taken reasonable precautions to provide proper equipment, suitable facilities, and trained staff, it is impossible to guarantee absolute safety against illness, injury, or loss resulting from my participation. I acknowledge the risk inherent in camp and wilderness activities and agree to assume that risk.

## ASSUMPTION OF PERSONAL RESPONSIBILITY

I agree that I am responsible for my safety while participating in the Fort Wilderness camp program and I am willing to assume that responsibility. This means that I agree to follow any instructions and directions given to me by the Fort Wilderness Staff and Counselors, and I will seek to act carefully and with good judgment at all times. I further acknowledge that my failure to adhere to safety rules established by group leaders may result in being asked to discontinue participation in the trip / program and its related activities. If I am barred from further participation in the activities, or if I voluntarily refrain from participation, or if I leave the trip, I am responsible for all expenses incurred and I have no claim for any refunds from Fort Wilderness, its officers, employees, contractors, or volunteers. I also agree to verify with my physician that I have no physical or psychological problems that would prohibit or limit my full involvement. I will submit a current medical form and inform the Fort Wilderness staff in writing of any medical or emotional condition that may restrict my safe participation in the program.

(Release/liability waiver page 1)

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## CONSENT WAIVER AND RELEASE

I understand the Fort Wilderness program/trip to be an engaging experience with many diverse activities conducted in a rustic camp environment. I am aware of the risks and am willing to assume them. Consequently, I waive, release, and discharge any and all claims for damages of death, personal injury, or property damage/loss, which I may have as a result of my participation in this program. I understand that these injuries and losses might result from the actions, in-actions, or carelessness of other participants as well as from my own actions. More specifically, I hereby hold Fort Wilderness Ministries, or any individual acting in an official or advisory/contracted capacity for Fort Wilderness Ministries, harmless and release Fort Wilderness Ministries and its agents/contractors from any liability and claims arising out of an accident or stressful incident during the program, except where caused by gross negligence or wanton misconduct or any of the released parties. I intend this waiver and release to also apply to any relatives, heirs, next of kin, personal representatives, or assigns who might pursue any legal action or claim on my behalf.

## INSURANCE

I understand that all activities, outings, and expeditions sponsored by Fort Wilderness are NOT covered by any form of health insurance. Whenever I participate in such activities, regardless of where they are held, type or duration, that I do so at my own risk and of my own free will. I am aware that I am responsible for paying all my own medical expenses and related costs for any injuries that may occur. In event of professional rescue needed, the rescuer will bill the rescued person(s) for cost incurred in the rescue. I currently have, and agree to maintain throughout my participation, valid and sufficient medical and accident insurance. I understand that this is my sole responsibility and release all persons and entities from providing this coverage for me.

**I HAVE READ THIS WAIVER AND RELEASE CAREFULLY AND I AM SIGNING IT VOLUNTARILY.**

Name (please print) \_\_\_\_\_ Age \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**SIGNATURE OF PARENT OR GUARDIAN IS REQUIRED FOR ALL PARTICIPANTS UNDER AGE 18**

Parent / Guardian (print name) \_\_\_\_\_

Relationship \_\_\_\_\_

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

***(Please sign and returned to Fort Wilderness Office 2 weeks prior to start of trip/program)***

**(Release / liability waiver page 2)**