

# PARTICIPATION AND RELEASE AND ASSUMPTION OF RISK AGREEMENT



**Springs** A Ministry of TENNESSEE BAPTIST MISSION BOARD

Participant's Name:	Age: Birth Date://
Home Address:	
Phone: Email:	
<b>WARNING:</b> By signing this form, you give up important legal righ	ts, including the right to sue. Please read carefully.
representatives (hereafter referred to as "the Convention") are not	Baptist Mission Board, their officers, directors, employees, volunteers, agents, and responsible for any injury, loss, or damage sustained by any person while
am aware of the possible risks, dangers, and hazards associated wi These risks include but are not limited to the following and those da a)The risks associated with travel to and from the Activity and between	or my child being permitted, to participate in the Activity, I acknowledge that I th participation in the Activity, including the possible risk of severe or fatal injury. lescribed below related to specific Activities: ween locations during the Activity; ft tissue damage, emotional distress, and even death while participating in
	ion's allowing me or my child to voluntarily participate in the Activity, I agree:
been caused by the negligence of the Convention.	ith, or related to, participating in the Activity, even though such risks may have nich I or my child might sustain while participating in the Activity, even though gligence of the Convention.
agents, publishers, and periodicals, the irrevocable right to use my	onvention and parties designated by them, including clients, licensees, purchasers, name and my child's name and/or photograph for sale and reproduction in any olay, exhibition, competition, or editorial use pertaining to ministries, activities, or
CHALLENGE-BY-CHOICE:	
	decline to continue participation at any time. The following activities are icipants are encouraged in a "Challenge-by-Choice" atmosphere and should not live from the activities at any time.
ACTIVITIES: (Initial your choice of participation beside each activit	y; failure to make a choice is deemed a "No".)
YESNO HIKING TRAILS	
Minimum requirements: Good physical condition and ability to mainclines. Sturdy shoes. Risks: Physical exertion, twisted ankles an spiders, insects, etc.	
a water fall or the rustic camp you should be aware that: 1) You ar home, i.e., insects (some poisonous), birds, snakes (some poisonou maintained but relatively unimproved. Natural rocks, roots, trees, or the state of the stat	rails may have vehicle traffic, also. As you traverse several ridges that take you to be in the woods and could be far from road access, 2) You are in someone else's s), bears and many other wild animals that like to be left alone, 3) Trails are etc., (which could cause injury) are left in place, 4) Weather in the region is d and prepare, follow all signs, stay on the trail, take water, proper clothing and ow where you are going.
yesno SWIMMING	
Minimum requirements: Demonstrated ability to swim. Modest swi	mming attire is required.
<i>Risks:</i> Drowning, abrasions and scrapes from concrete pool, chokin <i>Description:</i> Swimming in the pool is prohibited when no Camp depaddling in water from 3 to 5 feet deep. No Diving is allowed. You environments including insects and the sun. Sunscreen is highly re-	signated lifeguard is on duty. You will be swimming, jumping, wading and will also be exposed to all the natural elements inherent to outdoor
yesno PAINTBALL TARGET PRACTION	CE
Minimum requirements: At least 6 years of age and able to fo	llow basic instructions.
<i>Risks:</i> Abrasions and eye injuries from being accidently shot with a <i>Description:</i> Participants are to stand in a straight line parallel to tl	paintball. he targets. Upon command from the course manager, they are to use markers

(special equipment designed to propel paintball towards target) to shoot paintball at stationary targets 25-30 feet away. At no time do participants shoot at each other. On a command from the course manager, all shooting is to stop and markers are to be laid down facing the target range.

\_\_\_yes \_\_\_no ARCHERY

Minimum requirements: At least 8 years of age and able to follow basic instructions.

Risks: Serious injury, including permanent disability, loss of eyesight, paralysis and death.

Description: Participants are to stand in a straight line parallel to the targets and upon command from the course manager, they use solid recurve bows to shoot arrows at stationary targets 25-30 feet away. On command from the course manager, all shooting is to stop and any remaining arrows are to be placed on the ground.

### YES NO ORIENTEERING

Minimum requirements: Good physical condition and ability to maneuver over, around and through rugged terrain, and traverse steep inclines. *Risks:* Physical exertion, twisted ankles and other joints, scrapes and scratches, wild animals, poisonous and non-poisonous snakes, spiders, loss of direction, etc.

Description: Participants will be taught how to navigate using a map and compass. The terrain will be relatively rugged and unmarked. You will traverse several ridges that take you to navigational points. As you are navigating through the course, you must be aware that: 1) You are in the woods and could be far from road access, 2) You are in someone else's home, i.e., insects (some poisonous), birds, snakes (some poisonous), bears and many other wild animals that like to be left alone, 3) Weather in the region is unpredictable and may change suddenly. Take water, proper clothing and shoes, at least one other person and let someone know where you are going.

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## YES NO WADING

Minimum requirements: Sturdy tennis or water shoes, average physical condition, and must wear a life jacket/safety flotation device throughout the entire activity. Risks: Drowning, snake bite, scrapes and bruises from rocks, trees, other participants, head and other injuries from falls. Description: Wade in shallow water, climb over slippery rocks, with group.

### YES NO PAINTBALL

Minimum requirements: At least 10 years of age and in good physical condition.

*Risks:* Abrasions from impact of being hit, strenuous activity, running, jumping, sliding on rugged terrain, head and other injuries from falls and collisions, including broken bones, insect bites, bee's stings, etc.

Description: All participants are to wear camp-provided and mandatory protective face shield during play. Long pants, shirts, closed toed shoes and gloves are strongly recommended. You will be running, jumping, sliding, ducking, and hiding in and on rugged terrain that will be muddy, rocky, uneven, and possibly dangerous. You could be playing on a grassy field or in the woods on a regular paintball, speedball, and/or black light paintball course. You will also be carrying a paintball marker that uses compressed gas to propel small, lightweight plastic paint filled pellets towards your opponent. Being hit by a paintball can be painful and cause bruising. Personal paintball markers are not allowed.

## \_\_yes \_\_\_no THE LOW ROPES CHALLENGE COURSE

Minimum requirements: At least 10 years old and have the physical stature and mobility to encounter challenges and take initiatives.

Risks: Course includes climbing, lifting, balancing, physical exertion, group participation, on platforms from 2 to 10 feet off the ground. There is potential risk for a myriad of injuries, including falling, twisting ankles or other joints, pulled muscles, insect bites, etc.

Description: Simple in design, but highly effective, the Low Ropes Challenge Course is most effective for creating team-oriented programming. Distinct stations allow groups to participate simultaneously. Facilitators can choose an assortment of variations, based on the participating groups. Initiatives range from a Spider's Web, Team Wall, Island, Nitro Crossing, Wild Woozy, and a Trust Fall Platform, to fun-filled games.

#### YES NO THE CAROLINA CLIMBING WALL COURSE

knee/ankle problems diabetes seizures major surgery pregnancy allergies back/neck/arm problems

Minimum requirements: At least 12 years of age and must have the physical stature required to fit safely in the harness equipment.

Risks: Broken bones, head injuries, bumps, scrapes, other injuries and even death resulting from falls or hitting the wall. The course may also aggravate certain medical conditions, and individuals with a history of or inclination for certain medical conditions should consider carefully the potential dangers to themselves if they choose to participate in the course. It is strongly recommended that you consult with your physician about your particular situation. Included in the medical conditions of concern are: heart attack chest pain/pressure high blood pressure asthma stroke

*Description:* The Carolina Climbing Wall is a 50-foot-tall straight wall. Six participants can climb simultaneously. This course teaches self-confidence, trust, problem-solving and team work.

Acceptance of Medical Expenses: I understand that I have purchased through Tennessee Baptist Mission Board, by means of the Activity fee, a limited accident and illness insurance policy. This policy may pay a limited portion of medical expense, with certain exceptions, for medical treatment required by the camper on this form resulting from participation in this event. Pre-existing and self-inflicted injuries are not covered by this policy. Furthermore, I agree to pay any and all medical expenses incurred not covered by this policy and acknowledge that my medical, health, and liability insurance coverage is considered primary after the initial coverage mentioned herein.

Have you reached 18 years of age?YesNo	If NO, executed Minor Participant – Parental Authorization (below) is required.
By signing, I affirm I have read this release, understan	nd, and agree to its terms.
Signature:	Date:

#### MINOR PARTICIPANT – PARENTAL AUTHORIZATION:

As parents or legal guardians of the individual named a	bove, we have read this release and understand the nature of the activity in which this minor
has chosen to participate. We give our permission for th	e minor listed to participate in the chosen activities, and agree to the Release and Assumption
of Risk provisions as herein stated. We accept all medica	l, health and/or liability expenses which may arise from the minor's involvement in the activity.
We hereby appoint	as our attorney-in-fact and vest any of them with authority to authorize any necessary medical
treatment for the minor. By the date of the Activity, t	the minor is or will be at least years old.

Signature of Father: X	Date:	
Printed Name:	□Sole Legal Custody	Emergency Phone: ()
Witness: X	Printed Name:	
Signature of Mother: X	Date:	
Printed Name:	□Sole Legal Custody	Emergency Phone: ()
Witness: X	Printed Name:	
( <b>BOTH</b> parents must sign unless only one	e parent or guardian has legal c	ustody. If so, please check box under signature above.)
		CarsonSprings

Tennessee Baptist Churches giving through the *Cooperative Program* and the *Golden Offering for Tennessee Missions* make TBMB ministries possible.

