



Outing Release Form - Minor

(This document affects your legal rights, please read it carefully.)

Name _____ Phone _____
Address _____
City _____ State _____ Zip _____

Doctor's name _____ Phone _____
Medical Insurance Co. _____ Policy # _____
Date of recent Exam ___/___/___ Date of last Tetanus ___/___/___ Allergies _____
Medications being taken _____

--Parental Permission--

I give my permission for my child to attend ACTIVITY, OUTING OR EVENT PLANNING TO ATTEND, MONTH / DAY / YEAR. I understand that this experience may include, among other physical activities, rock climbing, ice-climbing, rappelling, hiking, skiing, snowshoeing, ropes courses, swimming, running, playing sports, riding in cars and vans, and eating. **I have full knowledge of the inherent risks and dangers involved.** I willingly assume such risks, and I will assume and pay any and all medical and emergency expenses arising out of my child's involvement with this activity. **In case of emergency**, I understand that every effort will be made to contact the parents or guardians of the participant involved. In the event that I cannot be reached, I hereby give my permission to the physician selected by OUTING LEADERSHIP (_____) **or** other on scene authorities to hospitalize, secure proper treatment of, and to order medical treatment including surgery, for my child as named herein. (If you or your child have special needs, please let us know!)

Parent or Guardian _____ **Date** _____

--Release from Liability and Assumption of Risk Agreement--

- A. I agree that I will not sue, or otherwise make any claim against CLIMBERS WITH CHRIST, or their employees or volunteers, for any loss, injury or damage resulting from any cause, including negligence on their behalf. (Initial_____)
- B. I am aware of the inherent risks involved in this activity, including but not limited to the risk of serious injury or death. (Initial_____)
- C. I agree that all equipment used, is used at my own risk. CLIMBERS WITH CHRIST, and any other party shall not be held liable. CLIMBERS WITH CHRIST makes no warranties regarding equipment used. (Initial_____)
- D. I understand that any route or activity chosen as a part of our outdoor adventure may not be the easiest but has been chosen for its interest and challenge for the participants. (Initial_____)
- E. To the fullest extent allowable by Law I agree to defend, indemnify, and hold harmless CLIMBERS WITH CHRIST, and any of its officers, members, affiliated organizations, agents, volunteers, or any employees for any injury or death caused by or resulting from my or my child or ward's participation in the activities associated with CLIMBERS WITH CHRIST, both scheduled or unscheduled, including transportation. (Initial_____)
- F. I understand this is a binding contract that supersedes any other agreement or representations, and is intended to provide a comprehensive release of liability but is not intended to assert defenses which are prohibited by law. (Initial_____)
- G. I am voluntarily participating in this activity with the knowledge of the inherent risks involved, and hereby agree to accept full responsibility for the risks involved. (Initial_____)
- H. I understand that CLIMBERS WITH CHRIST or any person associated with are not responsible or liable for any transportation to or from a CLIMBERS WITH CHRIST event. (Initial_____)

I have carefully read this agreement and I fully understand its contents. I am aware that I am releasing certain rights that I otherwise may have and I enter into this contract on behalf of myself and/or my child or ward, of my own free will. (Initial_____)

Parent or Guardian _____ **Print** _____ **Date** _____