

## **CAMP BIG SKY WAIVER AND RELEASE**

### **IMPORTANT INFORMATION**

Camp Big Sky is committed to conducting its recreation programs and activities in a safe manner and holds the safety of participants in high regard. Camp Big Sky continually strives to reduce such risks and asks that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants must recognize that there is an inherent risk of injury when choosing to participate in any outdoor recreational activity or program.

Camp Big Sky will not be responsible for any accidents or injuries which may be incurred, and participants are urged to review their own health insurance policy for coverage. Additionally, each participant is solely responsible for determining if he/she is physically fit and/or properly skilled for any activity. It is always advisable, especially if the participant is pregnant, disabled in any way or recently suffered from an illness, injury or impairment, to consult a physician before undertaking any physical activity.

### **WARNING OF RISK**

Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when participating in any recreational activity/program. Understandably, not all hazards and dangers can be foreseen. Participants must understand that depending upon the activity, certain risks, dangers and injuries due to acts of God, inclement weather, slipping, falling, inadequate or defective equipment, failure in supervision or instruction, premises defects, horseplay, carelessness, lack of skill or technique, and all other circumstances inherent to outdoor recreational activities/programs exist. Outdoor activities at Camp Big Sky may bring participants into contact with water, wildlife, plants and weeds and the risks inherent therewith. In this regard, it must be recognized that it is impossible for Camp Big Sky to guarantee absolute safety.

### **WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK**

Participant Name (Please print) \_\_\_\_\_  
Participant Age Group: 0-3 \_\_\_ 4-13 \_\_\_ 14-20 \_\_\_ 21-54 \_\_\_ 55+ \_\_\_  
School/Organization (list school, Key Club, etc.) \_\_\_\_\_  
Address (Number and Street) \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please read this form carefully and be aware that in signing up and participating in an activity at Camp Big Sky you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you may sustain as a result of participating in any and all activities connected with Camp Big Sky.

As a participant at Camp Big Sky or the parent/guardian of a participant, I recognize and acknowledge that there are certain risks of physical injury to participants in this activity, and I voluntarily agree to assume full responsibility of any injuries, including death, damages, or loss which I may or my minor child or disabled adult may incur on account of participation in the activity.

I hereby waive, release, and discharge Camp Big Sky (including its directors, officers, employees, and agents) from any and all claims from injuries, including death, damage, or loss, which I or my minor child or disabled adult may sustain on account of participation in the activity at Camp Big Sky.

In the event of an emergency, I authorize Camp Big Sky officials to secure from any licensed hospital, physician, and or medical personnel or Good Samaritan first aid providers, any treatment deemed necessary for immediate care of the participant and agree that I will be responsible for payment of any and all medical services rendered.

I have read and fully understand the above details of the waiver and release of all claims and permission to secure medical treatment. If registering online or via fax, your online or facsimile signature shall substitute for and have the same legal effect as an original signature.

In addition, I consent to the use of my photograph in Camp Big Sky brochures or publications.

Signature of Participant or Parent/Guardian\_\_\_\_\_

(A Parent/Guardian must sign for a minor child or disabled adult)

Date\_\_\_\_\_

Please return the signed, dated copy to:

Camp Big Sky  
PO Box 56  
Farmington, IL 61531