

Release and Hold Harmless Liability Waiver

Confidential! Any information will be made available only To course leaders & medical personnel in the event of an emergency. 418 Stanton Way, Pottsboro, TX 75076 Phone: 903-786-3148 Fax: 903-786-7535

Email: sandi@elkscamptexoma.com website: www.elkscamptexoma.com

Participants Name:	Dat	e:	Organization:
Address:	City:	State:	Zip:
Gender: M/F Date of Birth:	_Height:Weight:	Phone:	Email:
Person to be Notified in Emergency:	Phone:	Relationship:	
Insurance Carrier:	Policy #:		
Medical Information:			
List of Allergies:			
List of Dietary Restrictions:			
List of Physical Restrictions:			
List of Current Medications:			
Medical Conditions:			
Asthma: Back Pain: Bleeding	g Disorder: Broken I	Sones: Chest Pain:	Diabetes:
Dizziness:Epilepsy: Heart:	Kidney: Operati	ons: Thyroids:	_ Other Conditions:
Explanation of the Above:			
Are all immunizations current: Yes N			

Texas Elks Camp on Texoma Indemnity Agreement: When working outdoors and leading physical activities, safety is our main concern. Our activities and equipment are regularly inspected before use and checked annually for our archery, high ropes, challenge course, and waterfront activities. We will discuss basic rules of safety and provide the special organization, supervision, instruction and equipment you need to participate. It is impossible for us to eliminate all risk, however, and participants must commit to following instructions and use sound personal judgment. This will contribute greatly to everyone's well-being. By signing this waiver, the participant and/or guardian accepts that there are inherent risks and hazards in activities associated with and agrees to hold Texas Elks Camp on Texoma harmless.

I, as a participant or parent/guardian of a participant, understand I will be participating in activities that involve periods of physical exertion, balancing, heights (up to 50'), lifting, pushing, pulling, swimming, boat and climbing. I know most activities will be outdoors where I will need to watch for slippery and/or uneven footing, limbs and branches, insects/animal and possible exposure to extreme or inclement weather. I fully understand that my physical activity involves the risk of injury.

I understand I will not be forced to do any activity and that despite all reasonable precautions taken, a guarantee of absolute safety is impossible. I agree to exercise good personal judgment, to ask for help if I am concerned about my safety and to be responsible for deciding if a proposed activity is appropriate for me. I agree to inform my instructors of any physical, mental, or medical condition that might affect my ability to participate or affect other members of my group. I realize that failure to tell that information could result in serious harm to me or others. I also state that I am not under the influence of any chemical substance, including alcohol.

I agree to comply with safety instructions given and to be responsible for my personal safety and wellbeing. I/we agree to hold Texas Elks Camp on Texoma, its Directors, Officers, Employees, Agents, and/or Associates harmless for any accidents, injury, loss of or damage to personal property that may occur. I/we understand that all possible precautions are taken ensuring that all programs and activities sponsored by Texas Elks Camp on Texoma are conducted by mature and qualified personnel in a safe and responsible manner. I voluntarily assume the risk of the activities and agree to report any injuries immediately.

Photo Release: I, as a participant or parent/guardian of a participant grant permission for the videotaping and/or photographing of myself and the participants. Identifying information such as name, address, ages, and parents (in the case of a minor) may be included. The videotapes and/or photographs will be used by the staff specifically for: Photo sharing, website, and promotion. No other use of the videotapes and/or photographs shall be allowed.

If you have reason to decline the photo/media release, please initial here: _____

Signature of Parent / Guardian	_Printed Full Name	_Date
Signature of Participant	Printed Full Name	_Date

This form MUST be on file to participate in activities at Texas Elks Camp on Texoma.