



Warning, Acknowledgement of Risks, Acceptance of Responsibility and Release of Liability

PLEASE READ CAREFULLY

WARNING: There are significant elements of risk in any adventure sport or activity associated with watercraft, including but not limited to canoes, kayaks, rafts, rowboats, tubes and motorized crafts, and/or associated with hunting(referred to herein as activity), shooting (referred to herein as activity), camping (referred to herein as activity) and the use of any equipment therewith.

ACKNOWLEDGEMENT OF RISKS: I realize that changing water flow or currents, submerged or semi-submerged objects, trail or path obstructions, imperfections, depressions or ridges, varying wind and weather conditions, the presence of other watercraft, cyclists, hikers, hunters, fishermen, or walkers, the speed at which I travel, the stability characteristics of a watercraft, and certain foreseen or unforeseen events or hazards can contribute to the unpredictability of the activity; that certain risks associated with this activity including but not limited to collision, upset, overturn and sinking can result in getting wet, injured, exposed to the elements, drowned, and personal property damage or loss; that wearing a U. S. Coast Guard approved personal flotation device (PFD) is a basic safety precaution; that I may suffer accidents or illness in remote places where there are no medical facilities; and that I should ask about other potential hazards and recommended precautions and procedures. I also realize that participation in an activity can result in personal injury, paralysis, dismemberment or death.

EXPRESS ASSUMPTION OF RISK AND RESPONSIBILITY: In recognition of the inherent risks of the activity which I and/ or any minor children for which I am responsible, will engage in, I confirm that I am (we are) physically and mentally capable of participating in the activity and using the equipment. I/ we participate willingly and voluntarily, and I/ we assume full responsibility for personal injury, accidents, illness, including death. I/ we assume all responsibility for damage to or loss of personal property as the result of any accident that may occur. I/We hereby indemnify and hold harmless Camp Compass Inc. and its employees from all claims, lawsuits and verdicts for personal injury or property damage of said enrolled participants rising out of its operation whether negligent, reckless or internal acts of said Camp Compass Inc. of its employees.

RELEASE: In consideration of services or property provided, I, for myself and any minor children for which I am parent, legal guardian or otherwise responsible, any heirs, personal representatives or assigns, do hereby release Camp Compass, Inc., their principals, directors, officers, agents, employees and volunteers from all liability and waive any claim for damage arising from any cause whatsoever.

I HAVE READ THE FOREGOING WARNING, ACKNOWLEDGEMENT OF RISKS, EXPRESS ASSUMPTION OF RISK AND RESPONSIBILITY, AND RELEASE OF RESPONSIBILITY AND UNDERSTAND THAT BY SIGNING THIS DOCUMENT I MAY BE WAIVING VALUABLE LEGAL RIGHTS.

THOSE OF LESS THAN 18 YEARS OF AGE, SIGN HERE.

I affirm that I am ___ years of age and that the individual signing this Release with me is my parent/legal guardian.

☼ **Student Signature:** _____ **Date:** _____

PARENT/ LEGAL GUARDIAN SIGN BELOW

I affirm that I am the parent or legal guardian of the individuals signing this Release immediately above and that I have read and understand the Release and accept same, consent to the above individual's use of the equipment and to have Camp Compass Inc., transport the above individual if required, agree on my own behalf, on behalf of such individual's other parent or legal guardian, and on behalf of said individual to be bound by the contractual undertakings set forth in this Release.

☼ **Signature:** _____ **(SEAL) Date:** _____

Print Name: _____

☼ **Signature:** _____ **(SEAL) Date:** _____

Print Name: _____



CAMP
COMPASS
ACADEMY

Registration Form and Release

Enrollment Date _____ Program Year _____ Birthdate _____

Child's Name _____ Age _____

Parent's/guardian's name _____

Address _____

Phone (h) _____ (w) _____

Emergency Contact _____ Phone _____

Family Physician _____ Phone _____

Allergies/Handicaps _____

Email Address _____ School _____

I give permission for the above named child to participate in all activities and for my child to receive emergency care if necessary.

☼ Parent's/Guardian's Signature _____

Release from Liability

This release is necessary because Camp Compass is a non-profit entity and in some recent markets has been unable to procure liability insurance at an affordable cost. I have met with Camp Compass Office Personnel and filled out the registration form truthfully. I nor any relative, friend or legal counsel will hold Camp Compass Inc. or anyone associated with this system responsible for any accidents, injuries, or deaths to the above participant. I have had all my questions answered. I understand that the programs of Camp Compass Inc. are intended to help my child and with my signature relinquish the right to take court action against Camp Compass Inc., its officers, volunteers, staff and partners. I agree to arrange for all necessary fees to be paid according to the schedules provided, as well as transportation as needed and agree to participate in evaluations of the Camp Compass Programs. Finally, I give Camp Compass Inc., permission to use any media means, which may include but are not limited to writings, videos, and quotations, photographs of my child or myself for exposure or promotional reasons. I expect no monetary or other reimbursements in exchange for the before mentioned. I have read and understand the above statement and my signature shows I am in agreement.

☼ _____
Parent/ Guardian's Signature

Academy Supervisor

Print Name and Date

Print Name and Date