



Release and Waiver of Liability Agreement
CARMEL BAPTIST CHURCH – CARMELKIDZ CHILDREN’S CAMP

In exchange for participation in **CarmelKidz Children’s Camp** organized by **Carmel Baptist Church** (“Carmel”) of 1145 Pineville Matthews Road, Matthews, North Carolina, 28105 and/or use of the property, facilities and services of Carmel and Look Up Lodge, I agree for myself and (if applicable) for my children, to the following:

I recognize that participation in **CarmelKidz Children’s Camp** necessarily includes a trip to Look Up Lodge in Travelers Rest, South Carolina, which is a facility that is neither owned nor operated by Carmel.

I agree to observe and obey all posted rules and warnings, and further agree to follow any oral instructions or directions given by Look Up Lodge, Carmel, and their employees, representatives or agents.

I recognize that (my, my child’s) participation in the activities of **CarmelKidz Children’s Camp** involves certain inherent risks, dangers and hazards of property damage and personal injury, illness or even death, including but not limited to the possible risks arising from transportation-related activities, recreational activities, accidents in the outdoors, adverse weather conditions and injuries and illness as a result of foodborne illnesses and allergic reactions. I assume all risks of (my, my child’s) participation in **CarmelKidz Children’s Camp**, whether such risks are known or unknown to me at this time and hereby waive any all claims that I or my child may have against Carmel and their employees, representatives or agents. I assume full responsibility for personal injury to myself and my family members, and further release and discharge Carmel, and its employees, representatives or agents, for injury, loss or damage arising out of my or my family’s participation in **CarmelKidz Children’s Camp** whether caused by the fault of myself, my family, Carmel or other third parties.

I agree to inform Carmel in writing of any special circumstances that may affect my (child’s) ability to participate fully in the above described activity, including but not limited to issues regarding behavioral, psychological, medical, dietary, allergy or physical conditions. Specifically with regard to dietary and allergy restrictions, I understand that Carmel cannot guarantee that any food item provided during **CarmelKidz Children’s Camp** is allergen free. I agree to complete a Medication Authorization Form, submit a physician-prescribed action plan for all life-threatening allergies or health conditions and provide my (self, child) with all necessary medications to last during the entire stay.

I agree to indemnify and defend Carmel against all claims, causes of action, damages, judgments, costs or expenses, including attorney fees and other litigation costs, which may in any way arise from my or my child’s use of or presence upon the facilities of Carmel or Look Up Lodge.

I agree to pay for all damages to the facilities of Carmel or Look Up Lodge caused by my or my family's negligent, reckless, or willful actions.

I give my consent and permission for the taking of photographs and/or video of my (self, child) during the described event and waive and/or assign any and all rights (including copyright) for use in various media including website and camp DVD.

I consent to the participation of my (self, child) _____
(print full legal name) in **CarmelKidz Children's Camp**, and agree on behalf of myself or the above minor to all of the terms and conditions of this Agreement. By signing this Release of Liability, I represent that I have legal authority over and custody of (child's name)

In the event of any injury to myself or to the above minor during participation in **CarmelKidz Children's Camp**, I give my permission to Carmel or to the employees, representatives or agents of Carmel to arrange for all necessary medical treatment for which I shall be financially responsible. This temporary authority will begin on July 14, 2019 and will remain in effect until terminated in writing by the undersigned or July 19, 2019 at 3:00pm, whichever occurs first. Carmel shall have the following powers:

- a. The power to seek appropriate medical treatment or attention on behalf of my child as may be required by the circumstances, including without limitation, that of a licensed medical physician and/or a hospital.
- b. The power to authorize medical treatment or medical procedures in an emergency situation; and
- c. The power to make appropriate decisions regarding clothing, bodily nourishment and shelter.

Parental Agreement:

I give my child permission to attend the 2019 **CarmelKidz Children's Camp**, and to participate in all camp related activities. ____ (initial here)

I HAVE CAREFULLY READ AND UNDERSTAND THIS RELEASE AND WAIVER OF LIABILITY. BY SIGNING IT, I AGREE TO RELEASE AND DISCHARGE CARMEL BAPTIST CHURCH FROM ANY AND ALL LIABILITY FOR CLAIMS FOR PROPERTY DAMAGE, PERSONAL INJURY, SPECIAL DAMAGES, INCLUDING INDIRECT DAMAGES AND WRONGFUL DEATH RELATING TO MY/MY CHILD'S PARTICIPATION IN ANY OF THE ACTIVITIES RELATED TO THE CARMELKIDZ CHILDREN'S CAMP.

Dated: _____

Signature: _____

Print Name: _____

Address: _____

Home Phone #: _____ Cell Phone # _____