

RELEASE

Guest Group

Participant's Name: _____ Age: _____ Birth Date: ____/____/____
Home Address: _____ Sex: Male Female
Phone: _____ Email: _____
If applicable: Parent/Legal Guardian Name: _____ Email: _____
Emergency Phone: _____

WARNING: By signing this form, you give up important legal rights, including the right to sue. Please read carefully.

EVENT DESCRIPTION ("Event"): I am/My child is a willing participant in an event sponsored by _____ ("Group") being held at Linden Valley Baptist Conference Center ("LVBCC"). I understand that Group has planned the Event and is responsible for the content and activities selected for the Event and that LVBCC is only providing accommodations and facilities for the Event.

POTENTIAL RISKS: I understand that my own/my child's participation in the Event may involve risk of injury and even death to myself/my child. I understand that these risks include but are not limited to the following and those described further below in this document related to specific Activities:

- a) The possibility of bodily injury including broken bones, soft tissue damage, emotional distress, and even death while participating in the Event and related Activities;
- b) The risks associated with travel to and from the Event and between locations during the Event; risks of trips, falls, jostling by other attendees, and stumbling on steps or rough terrain.
- c) The hazards of being in a wilderness-type setting (where ticks, mosquitoes, and wild animals may be found), distant from physician and hospital care. Participants are responsible for bringing – and using – bug spray, sunscreen, appropriate clothing, and other items needed to protect themselves from the dangers of nature.

ASSUMPTION OF RISK: For and on behalf of myself, my heirs, administrators, executors, and next of kin; and in consideration of my being allowed, or my child being allowed, to participate in the Event and related Activities, I hereby expressly and specifically assume all risks of injury, loss, or damage, which I or my child might sustain while participating in the Event and related Activities. These risks include but are not limited to those listed under potential risks and those described below related to specific Activities.

INDEMNIFICATION AND RELEASE OF LIABILITY: I do further hereby release and discharge from liability and agree to defend, indemnify, and forever hold harmless Tennessee Baptist Mission Board, The Tennessee Baptist Convention, and the volunteers, employees, servants, agents, officers, and directors of these entities, herein collectively referred to as Releasees, from any and all causes of action arising from or relating to my/my child's participation in the Event, including but not limited to travel, lodging, transportation, or on account of first aid or other medical treatment rendered by Releasees, for damages or injuries I/my child may suffer including but not limited to claims for personal injury, disability, sickness, loss of limb or life, **even if said claims arise from injuries or illnesses or other damages caused by the sole negligence or fault of one or more of the Releasees.** Notwithstanding anything which may appear to the contrary, this agreement shall not be understood, however, to release the intentional acts or gross negligence of the Releasees.

I understand that I am/my child is solely responsible for my/ his or her personal effects and property and that no one will provide security for any of my/ his or her items and I will hold the above Releasees harmless in the event of theft or loss resulting from any source or cause.

PUBLICATION RELEASE: I understand that during the Event and related Activities, one or more of the Releasees (or its agents or designees) may be photographing or shooting video footage of the Event and related Activities and that I/my child may be photographed or included in a video shot. I hereby give the Releasees and parties designated by them permission to photograph me/my child for commercial purposes and agree to the following: (1) being photographed by any means; (2) commercial or any other use of my/my child's likeness without compensation; (3) specifically waiving all rights of privacy during the photographing. Furthermore, I hereby give the Releasees and parties designated by them including clients, licensees, purchasers, agents, publishers, and periodicals, the irrevocable right to use my/my child's name and/or photograph/video image for sale or reproduction in any print or electronic medium for purposes of advertising, trade, display, exhibition, competition, or editorial use.

PERSONAL CONDUCT: I commit myself/my child to attend and be on time for all Event sessions. I agree that a participant in the Event is bound by the applicable policies and rules, as amended from time to time and that all decisions of Event's Director are final. I understand that failure to abide by the rules may result in a participant's having to leave the Event at his/her own expense.

CHALLENGE-BY-CHOICE: Participation in an Activity is entirely voluntary. A participant may decline to continue participation at any time. The following Activities are designed to build the individual's self-esteem and confidence. Participants are encouraged in a "Challenge-by-Choice" atmosphere and should not feel pressured to participate in any way. Participants may withdraw from an Activity at any time.

ACTIVITIES: (Indicate your choice of participation beside each Activity. Failure to make a choice is deemed a “No.”)

YES NO **HIKING TRAILS**

Minimum requirements: Good physical condition and ability to maneuver over, around & through rugged terrain, and traverse steep inclines. Sturdy shoes.

Risks: Physical exertion, twisted ankles and other joints, wild animals, poisonous and non-poisonous snakes, spiders, insects, etc.

Description: Trail system covers relatively rugged terrain. Some trails may have vehicle traffic, also. As you traverse several ridges that take you to a water fall or the rustic camp you should be aware that: 1) You are in the woods and could be far from road access, 2) You are in someone else’s home, i.e., insects (some poisonous), birds, snakes (some poisonous), bears and many other wild animals that like to be left alone, 3) Trails are maintained but relatively unimproved. Natural rocks, roots, trees, etc., (which could cause injury) are left in place, 4) Weather in the region is unpredictable and may change suddenly. Hikers should plan ahead and prepare, follow all signs, stay on the trail, take water, proper clothing and shoes, hike with no less than one other person and let someone know where you are going.

YES NO **SWIMMING**

Minimum requirements: Demonstrated ability to swim. Modest swimming attire is required.

Risks: Drowning, abrasions and scrapes from concrete pool, choking, eye irritation, skin irritation and sunburn.

Description: Swimming in the pool is prohibited when no Camp designated lifeguard is on duty. You will be swimming, jumping, wading and paddling in water from 3 to 9 feet deep. No Diving is allowed. You will also be exposed to all the natural elements inherent to outdoor environments including insects and the sun. Sunscreen is highly recommended. Decisions of the lifeguard are final.

YES NO **PAINTBALL TARGET PRACTICE**

Minimum requirements: At least 6 years of age and able to follow basic instructions.

Risks: Abrasions and eye injuries from being accidentally shot with a paintball.

Description: Participants are to stand in a straight-line parallel to the targets. Upon command from the course manager, they are to use markers (special equipment designed to propel paintball towards target) to shoot paintball at stationary targets 25-30 feet away. At no time do participants shoot at each other. On a command from the course manager, all shooting is to stop and markers are to be laid down facing the target range.

YES NO **ARCHERY**

Minimum requirements: At least 8 years of age and able to follow basic instructions.

Risks: Serious injury, including permanent disability, loss of eyesight, paralysis and death.

Description: Participants are to stand in a straight-line parallel to the targets and upon command from the course manager, they use solid recurve bows to shoot arrows at stationary targets 25-30 feet away. On command from the course manager, all shooting is to stop, and any remaining arrows are to be placed on the ground.

YES NO **KAYAKING/TUBING/WADING**

Minimum requirements: At least 6 years of age, sturdy tennis or water shoes, average physical condition, and must wear a life jacket/safety flotation device throughout the entire activity. Guests under age 10 will (a) be required to be accompanied by an adult; and (b) be limited to a 1-mile river trip and will not be eligible for any of the trips longer than 1 mile

Risks: Drowning, snake bite, scrapes and bruises from rocks, trees, vehicle accident, and other participants.

Description: Transportation by a LVBCC-owned bus to one of three “put-in” points along the scenic Buffalo River for either a one-mile, four-mile or eight-mile trip. Floaters are to float down the river on a “sit-on” or “sea” style kayak or a rental-grade tube back to LVBCC. Although the Buffalo River seems to be a mild river with only a few class one rapids, it can also be inherently unpredictable. Rocks, trees, steep terrain, deep water in places, snakes (some poisonous), weather, other people, and the like, all put you at risk for unforeseen injury or loss.

YES NO **FISHING/WADING**

Minimum requirements: Sturdy tennis or water shoes, average physical condition, and must wear a life jacket/safety flotation device throughout the entire activity.

Risks: Drowning, head injuries, snake bite (some poisonous), scrapes and bruises from rocks, trees, pierced by a fish hook, insect bites, and other participants.

Description: Stand on bank or wade in shallow water, cast lines, bait hooks and handle fish.

YES NO **PAINTBALL**

Minimum requirements: At least 10 years of age and in good physical condition.

Risks: Abrasions from impact of being hit, strenuous activity, running, jumping, sliding on rugged terrain, head and other injuries from falls and collisions, including broken bones, insect bites, bee’s stings, etc.

Description: All participants are to wear camp-provided and mandatory protective face shield during play. Long pants, shirts, closed toed shoes and gloves are strongly recommended. You will be running, jumping, sliding, ducking, and hiding in and on rugged terrain that will be muddy, rocky, uneven, and possibly dangerous. You could be playing on a grassy field or in the woods on a regular paintball, speedball, and/or black light paintball course. You will also be carrying a paintball marker that uses compressed gas to propel small, lightweight plastic paint filled pellets towards your opponent. Being hit by a paintball can be painful and cause bruising. Personal paintball markers are not allowed.

____ YES ____ NO **THE LOW ROPES CHALLENGE COURSE**

Minimum requirements: At least 10 years old and have the physical stature and mobility to encounter challenges and take initiatives.

Risks: Course includes climbing, lifting, balancing, physical exertion, group participation, on platforms from 2 to 10 feet off the ground. There is potential risk for a myriad of injuries, including falling, twisting ankles or other joints, pulled muscles, insect bites, etc.

Description: Simple in design, but highly effective, the Low Ropes Challenge Course is most effective for creating team-oriented programming. Distinct stations allow groups to participate simultaneously. Facilitators can choose an assortment of variations, based on the participating groups. Initiatives range from a Spider’s Web, Team Wall, Island, Nitro Crossing, Wild Woozy, and a Trust Fall Platform, to fun-filled games.

____ YES ____ NO **THE ODYSSEY HIGH ROPES COURSE**

Minimum requirements: At least 12 years of age and must have the physical stature required to fit safely in the harness equipment. There is a 250 lb. maximum weight limit.

Risks: The course may aggravate certain medical conditions, and individuals with a history of or inclination for certain medical conditions should consider carefully the potential dangers to themselves if they choose to participate in the course. It is strongly recommended that you consult with your physician about your particular situation. Included in the medical conditions of concern are:

- heart attack •chest pain/pressure •high blood pressure •asthma •stroke •knee/ankle problems
- pregnancy •major surgery •diabetes •seizures •allergies •back/neck/arm problems

Description: This course is a high ropes adventure course that challenges the participant to traverse a series of cables strung between 50’ tall towers. Participants work in a team of 2 to 4 people to successfully traverse the course and overcome obstacles in the course design. This course teaches self-confidence, trust, problem-solving and team work. Each participant is to wear a harness and is tethered by a static rope to safety cables.

____ YES ____ NO **ZIP LINE**

Minimum requirements: At least 10 years of age and must have the physical stature required to fit safely in the harness equipment. There is a maximum 250 lb. weight limit.

Risks: Physical exertion in climbing up cargo net, bounce and jolt to body stepping off of platform, lower joint and back pains from climbing, and anxiety from heights or speed from free fall. Individuals suffering from fear of heights should carefully review and consider the impact of this experience. It is strongly recommended that you consult with your physician about your particular situation. Included in the medical conditions of concern are:

- heart attack •chest pain/pressure •high blood pressure •asthma •stroke •knee/ankle problems
- pregnancy •major surgery •diabetes •seizures •allergies •back/neck/arm problems

Description: A 620’ ride suspended from a cable. Participants are to climb a cargo net to a platform. They will be connected by trained staff to the cable using a pulley and harness system to ensure safety. Two participants ride parallel cables 6’ apart, from a wooded area into an open field where trained staff will meet them to disconnect the harness and pulley. You will begin 30’ off the ground and end the Zip Line 12’ off the ground.

ACCEPTANCE OF MEDICAL EXPENSES: I understand that I have purchased through Tennessee Baptist Mission Board, by means of the Event fee, a limited accident and illness insurance policy. This policy may pay a limited portion of medical expense, with certain exceptions, for medical treatment required by the Participant on this form resulting from participation in the Event. Pre-existing and self-inflicted injuries are not covered by this policy. Furthermore, I agree to pay any and all medical expenses incurred not covered by this policy and acknowledge that my medical, health, and liability insurance coverage is considered primary after the initial coverage mentioned herein.

ADULT VERIFICATION: I verify that I am at least 18 years of age when signing this document and, therefore, an adult.
____ YES ____NO (If “No,” executed Minor Participant – Parental Authorization (below) is required.)

By signing in my own handwriting or typing my name below using electronic means, I affirm I have read, understood, and agreed to its terms, and have effectively signed the release.

Signature: _____ Date: _____

MINOR PARTICIPANT – PARENTAL AUTHORIZATION:

As parents or legal guardians of the individual named above, we have read this release and understand the nature of the activity in which this minor has chosen to participate. We give our permission for the minor listed to participate in the Event and the chosen Activities and agree to the assumption of risks, Indemnification, release of liability, and publication release.

We accept responsibility for all medical, health and/or liability expenses which may arise from the minor’s involvement in the Event. We authorize Tennessee Baptist Mission Board’s designated representative(s) to serve as our attorney-in-fact and vest each of them with authority to authorize any necessary medical treatment for our minor child.

By the date of the Event, the minor is or will be at least _____ years old.

I am a parent or legal guardian of the minor, and I am authorized to sign this form on behalf of any other parent or legal guardian of the minor.

By signing in my own handwriting or typing my name below using electronic means, I affirm I have effectively signed this document and agreed to its terms and conditions on behalf of myself and any other parent or legal guardian.

I agree and accept.

Signature of Parent or Legal Guardian: _____ Date: _____