

Camp and Retreat Liability Waiver Form

Participant Information

Full Name

Date of Birth

Address

Phone Number

Email Address

Emergency Contact

Full Name

Phone Number

Relationship

Liability Waiver and Assumption of Risk

I, the undersigned, understand that participation in camp and retreat activities involves inherent risks, including but not limited to accidents, injury, or illness. By signing below, I hereby release and hold harmless the camp organizers, staff, and volunteers from any and all liability, claims, and demands arising from participation at this camp or retreat. I accept full responsibility for my conduct and any resulting consequences.

I have read, understood, and voluntarily agree to these terms.

Participant Signature

Date

Parent/Guardian Signature (if under 18)

Date