

Overnight Retreat Hold Harmless Waiver

I, the undersigned participant, acknowledge that my participation in the overnight retreat ("Retreat") involves certain inherent risks, hazards, and dangers. I voluntarily assume all such risks associated with my participation in the Retreat, including but not limited to transportation, lodging, meals, recreational or group activities, and any other events offered in connection with the Retreat.

Release of Liability

I hereby release, waive, discharge, and agree to hold harmless [Retreat Host/Organization Name], its officers, directors, employees, volunteers, agents, successors and assigns (collectively, "Released Parties") from any and all liability, claims, demands, actions, or causes of action whatsoever, known or unknown, arising out of or related to any loss, damage, injury, or harm (including death) that may be sustained by me, or to any property belonging to me, whether caused by the negligence of the Released Parties or otherwise, while participating in or traveling to or from the Retreat.

Medical Authorization

I authorize the Released Parties to seek medical treatment for me in the event of injury, accident, or illness during the Retreat, and agree to be responsible for any resulting medical bills or expenses incurred on my behalf.

Acknowledgment of Understanding

I have read this Hold Harmless Waiver in its entirety and fully understand its terms. I acknowledge and agree that I am signing this waiver freely and voluntarily, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Participant's Name (Print):

Signature:

Parent/Guardian Name (if under 18):

Parent/Guardian Signature:

Date:
