



**...a Premiere Christian  
Camp and Retreat Center**  
887 Jumonville Rd., Hopwood, PA 15445  
(724) 439-4912 phone (724) 439-1415 fax

## Adventure Program Waiver Consent & Release Form

*if participant is under 18 years of age*

INTENDING TO BE LEGALLY BOUND HEREBY, I, \_\_\_\_\_, parent of \_\_\_\_\_, hereby freely, knowingly, and voluntarily consent to and give permission to my above-named child, to participate in high adventure camping activities conducted under the auspices of the Jumonville, Inc. For purposes of this Consent and Release, the term "high adventure camping activities" shall be deemed to include, but not be limited to, white water rafting, canoeing, rock climbing, rappelling, mountainboarding, challenge course activities and spelunking.

I fully recognize that my child's participation in high adventure camping activities can be dangerous, and hereby acknowledge that my consent to my child's participation in any of these activities is voluntary and informed. I acknowledge that I have been advised of the risks to my child's personal safety attendant to high risk camping activities, and that, with a full and complete awareness of these risks, I consent to his participation in these activities. I acknowledge that the staff has been fully, completely and properly trained in the methods, practices, and techniques necessary and appropriate to participation in high adventure camping activities. I further acknowledge that my child has been trained in the methods, practices, and techniques necessary and appropriate to participation in high adventure camping activities and that the use or nonuse of such methods, practices and techniques by my child shall, under no circumstances, result in claim against, or the imposition of any liability to any nature whatsoever, with respect to Jumonville, Inc.

As the parent of \_\_\_\_\_, I hereby fully waive, release and discharge the Jumonville, Inc., its agents, employees, successors and assigns, from any and all rights, claims, and actions, arising now and/or in the future, out of my children's participation in high adventure camping activities conducted by and/or under the auspices of the Jumonville, Inc. I further agree to indemnify and hold harmless the Jumonville, Inc., from any claims arising out of any injury or harm my child may cause to another individual during the course of his participation in high adventure camping programs. I also agree that Jumonville may use pictures or videos of my child for promotional purposes.

While we do not require a medical information form, we do need to know if any of the following conditions are present in your group: elevated blood pressure, any heart condition, seizure disorders, asthma, allergies serious enough to cause anaphylaxis, wounds, and/or orthopedic anomalies.

Date: \_\_\_\_\_ Signature of Parent: \_\_\_\_\_ Name of Parent (print): \_\_\_\_\_



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## Adventure Program Waiver Consent & Release Form

*if participant is 18 years of age or older*

INTENDING TO BE LEGALLY BOUND HEREBY, I, \_\_\_\_\_, on behalf of myself, my heirs, executors, administrators, and assigns, do hereby fully waive and release and discharge the Jumonville, Inc., its agents, employees, successors and assigns, from any and all rights, claims, and actions, arising now and/or in the future, out of my participation in high adventure camping activities conducted by and/or under the auspices of the Jumonville, Inc. For purposes of this Waiver and Release, the term "high adventure camping activities" shall be deemed to include, but not be limited to, white water rafting, canoeing, rock climbing, rappelling, mountainboarding, challenge course activities and spelunking.

I fully recognize that participation in high adventure camping activities can be dangerous, and hereby acknowledge that my participation in any of these activities is voluntary and informed. I acknowledge that I have been advised of the risks to my personal safety attendant to high risk camping activities, and that my participation is undertaken with a full and complete awareness of these risks. I further acknowledge that I have been properly trained in the methods, practices, and techniques necessary and appropriate to participation in high adventure camping activities, and that my use or nonuse of such methods, practices and techniques shall, under no circumstances, result in claim against, or the imposition of any liability of any nature whatsoever, with respect to Jumonville, Inc.

I further agree to indemnify and hold harmless the Jumonville, Inc., from any claim arising out of any injury or harm I may cause to any other individual during the course of his participation in high adventure camping programs. I also agree that Jumonville may use pictures or videos of me for promotional purposes.

While we do not require a medical information form, we do need to know if any of the following conditions are present in your group: elevated blood pressure, any heart condition, seizure disorders, asthma, allergies serious enough to cause anaphylaxis, wounds, and/or orthopedic anomalies.

Name of Participant (please print): \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Participant: \_\_\_\_\_