



CHALLENGE COURSE — TEAM BUILDING PARTICIPANT FORM

Bring this form with you to Ridgecrest. For more information, call 828-669-4844.

Assumption of Risk/Authorization for Treatment/Release of Claims: The undersigned hereby acknowledges that participation in outdoor programs and recreational activities, including challenge courses, involves an inherent risk of physical injury caused by, but not limited to, falls, collision with persons or objects, being struck by falling objects, and exertion, and assumes all such risks. Dangers related to such activities include, but are not limited to hypothermia, dehydration, heat exhaustion, heat stroke, broken bones, strains, sprains, cuts, scrapes, bruises, concussions and heart attacks. Each participant in these activities should realize that there are risks and dangers inherent in them, and also in the training for, participation in and travel to and from such activities. It is the sole responsibility of each participant to participate only in those activities for which he or she has the prerequisite skills, qualifications, preparations and training.

I understand the rules of play for the activity in which I intend to participate and will comply with all rules and regulations. If I observe any unusual or unnecessary hazard during my participation I will bring such to the attention of the nearest official as soon as practical. In consideration for acting as a participant in the events(s) identified herein, I, the undersigned, do for myself, or for and on behalf of my child under eighteen (18) years of age ("minor child"), hereby give my permission for medical personnel to administer medical care to me or my minor child as necessary. I, the undersigned, for myself, or for and on behalf of my minor child, do hereby release and forever hold harmless the directors, officers, employees, agents, contractors and affiliates of LifeWay Christian Resources of the Southern Baptist Convention ("LifeWay"), Ridgecrest Conference Center, camp or event sponsors and state conventions, from any and all claims or demands for personal injury, sickness, and death, as well as property damage and expenses, of any nature whatsoever, incurred by myself or my minor child. I further assume personal responsibility for any loss of or damage to property incurred by myself or my minor child by theft or otherwise. I also assume full personal responsibility for all medical bills for myself or my minor child I agree to indemnify LifeWay and Ridgecrest Conference Center from any and all demands for personal injury, sickness and death as well as property damage and expenses of any nature whatsoever incurred by me or my minor child due to dismissal from the event. I further hereby assume all responsibility for all transportation costs related to any such dismissal from the event of me or my minor child.

Photo/Video Release: I understand that as a participant, I or my minor child may be photographed or recorded in any medium during normal Challenge Course Games/Activities and these photos/videos may be used in promotional materials and offered for sale to participants, their parents, other relatives and other interested parties.

Participant's Printed Name: _____

Participant's Signature: _____ Date: _____

The portion below must be signed by a parent or legal guardian if participant is a minor.

This is to certify that I, as parent/legal guardian with responsibility for this participant, do consent and agree not only to his/her release of LifeWay and Ridgecrest Conference Center but also to release and indemnify the releases from any and all liabilities incident to his/her involvement in Challenge Course Games/Activities for myself, my heirs, assigns, and next of kin.

Parent/Legal Guardian signature: _____ Date: _____

Phone: (_____) _____

Please add any medical information that you feel LifeWay should be aware of in connection with your participation in the Challenge Course Games/Activities: _____

Certificate of Acknowledgement of Notary Public

State of _____)

County of _____)

On this _____ day of _____, 20____, before me personally appeared _____ (name of signer), whose identity was proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to this document, and who acknowledged that he/she signed the above/attached document.

(seal)

Notary Public

My Commission Expires