



Catskill Outback Adventureland NY Inc. Ring Homestead Camp Inc Outdoor Adventure Activities

ASSUMPTION OF RISK/RELEASE OF LIABILITY/INFORMED CONSENT

I UNDERSTAND THAT PARTS OF Catskill Outback/**AdventureLand/Ring Homestead Camp Inc.** PROGRAM MAY BE PHYSICALLY/EMOTIONALLY DEMANDING. I AFFIRM THAT MY HEALTH IS GOOD, AND THAT I AM NOT UNDER A PHYSICIAN'S CARE FOR ANY UNDISCLOSED CONDITION THAT BEARS UPON MY FITNESS TO PARTICIPATE IN Catskill Outback/**Adventureland / Ring Homestead Camp Inc.** ACTIVITIES. I UNDERSTAND THAT THE LEVEL OF PARTICIPATION IN **Catskill Outback/Adventureland/Ring Homestead Camp Inc.** IS AT ALL TIMES COMPLETELY VOLUNTARY AND UP TO THE INDIVIDUAL'S CHOICE. I ALSO RECOGNIZE THE INHERENT RISK OF INJURY OR DISABILITY AND/OR DEATH IN Catskill Outback/**Adventureland NY/Ring Homestead Camp INC.** ACTIVITIES AND UNDERSTAND THAT EACH PARTICIPANT MUST ASSUME THE RISK OF INJURY THAT COULD RESULT FROM ANY OF THE ACTIVITIES. I RELEASE Catskill Outback/**Adventureland NY/Ring Homestead Camp Inc.** AND ITS STAFF MEMBERS, PRINCIPALS, AND BOARD FROM ALL LIABILITY FOR ANY INJURY TO ME FROM PARTICIPATING IN Catskill Outback/ **Adventureland NY/Ring Homestead Camp Inc.** ACTIVITIES. I ALSO GIVE MY PERMISSION TO HAVE MY IMAGES REUSED FOR RING HOMESTEAD CAMP WEBSITE AND/OR OTHER SOCIAL MEDIA AND ADVERTISEMENT.

DATE _____

PARTICIPANT NAME *(Please Print)*

PARTICIPANT SIGNATURE*

I _____ am _____ for _____. I have been granted permission by the children's parents to sign this waiver on their behalf.

*PARENT OR GUARDIAN'S SIGNATURE (IF PARTICIPANT IS UNDER 18 YEARS OLD)