



Labor Day Family Camp Liability Waiver
September 3-6, 2010

I recognize that certain hazards and dangers are inherent in the SpringHill events and programs and particularly, but not limited to, the activities of horseback riding, swimming, river rafting/canoeing, high adventure areas, paintball, extreme sports, and I acknowledge that although SpringHill has taken safety measures to minimize the risk of injury to participants, SpringHill cannot insure nor guarantee that the participants equipment, premises, and/or activities will be free from hazards, accidents, and/or injuries. I further recognize the importance of knowing and abiding by the camp's rules, regulations, and procedures for the safety of activity participants.

In consideration of SpringHill accepting and permitting me to attend camp and participate in the camp's activities, I agree that SpringHill, a non-profit corporation, its agents, officers, employees, trustees and volunteers will not be liable for any injury, death, damage and/or loss to me and/or anyone claiming on my behalf, and I further agree to hold harmless, indemnify and defend SpringHill, its officers, agents, employees, trustees and volunteers for and from any and all damage during the time of my attendance and participation at SpringHill, whether such injury, illness, or damage occurs on or off the camp's premises.

I certify that photographs or videotape pictures of myself participating in the SpringHill programs may be reproduced and utilized in promotional materials for the camp.

I am at least eighteen (18) years of age and I am under no mental or legal disability which would prevent me from signing and executing this agreement. I further represent that I have read (or have had read to me) and understood the terms of this agreement.

Form with fields for 1st and 2nd Adult First & Last Name, Address, City, State, Zip, Home Phone, Cell Phone, Email, and Child's Name/Age for multiple children.

Form with fields for 1st Adult Signature, Date, 2nd Adult Signature, Date, and Witness Signature, Date.

Form with fields for Witness Address and Witness City, State, Zip.

(Signature must be witnessed by a person over 18 yrs old, other than your immediate family)