



Southern District YMCA Camp Lincoln Program Participant Information, Assumption of Risk, and Agreements of Release and Indemnity

School/Organization: _____ Program Date(s): _____

Dear Parents & Guardians,				
Welcome to YMCA Camp Lincoln! Please read and complete this document carefully. This form must be completed and signed by the participant (if over 18) or a parent or guardian prior to participating in our programs.				
YMCA Camp Lincoln programs are designed to be fun and exciting. Participants engage in a variety of teambuilding activities, low and high ropes courses, boating, ecology lessons, and more. Our trained facilitators lead each group through a progression of age appropriate activities with the intention of working toward their stated goals. Common goals include building self-confidence, creating trust within a group, communication skills, developing leadership skills, and problem solving skills. Safety is the number one priority of the program. Every participant has the opportunity to choose their level of participation. Following the safety procedures and guidelines and exercising good personal judgment will minimize the risks involved. It is important for participants to accept personal responsibility for their own safety and the safety of other members of the group by following instructions. Please contact YMCA Camp Lincoln with any program questions. We are excited to host you soon!				
General Participant Information Name:		Date of	f Rirth.	
Address:			i bii tii:	
Town:			 _ State:	Zip:
Gender: P	hone:	E-Mail:		
Parent or Guardian's Name (If Part	cicipant under 18):			
Address:				
Town:			State:	Zip:
Phone:	E-Mail:		_	
Emergency Contact Information In the event of an emergency, whe	re parents/guardians cannot be r	reached, St	taff may contac	t:
Name:			Relationship: _	
Phone:	E-Mail:		_	

Medical Information

Does the participant have any medical or behavioral conditions (past or present) that could interfere with fully participating in the program? Yes No If yes, please describe:





Is the participant currently taking any medications? Yes	No If yes, please give the medication(s) name and the	
condition for which it is described:	ito ii yes, piease give the medication(s) hame and	

Does the participant...

Have any allergies? Yes No

Have a chronic or recurring illness? Yes No

Had a recent injury or infectious disease? Yes No Have any seizure disorders? Yes No

Assumption of Risk and Agreements Release & Indemnity

In considering the services of YMCA Camp Lincoln in offering these activities, I myself (or Parent on behalf of my minor child) agree to the following:

Assumption of Risk

I recognize that YMCA Camp Lincoln will operate in good faith. However, situations may arise when the staff may find it necessary to terminate an activity. The staff may also refuse or terminate the participation of any person judged to be incapable of meeting the rigors or requirements of any activity. I acknowledge that no guarantees have been made with respect to achieving objectives. I fully understand YMCA Camp Lincoln programs will subject me (my child) as a participant to certain stresses and hazards, not all of which can be foreseen. I understand that reasonable precautions will be taken to protect myself (my child) as a participant but that risk or injury can never be completely eliminated. I do, therefore, assume all of the ordinary risks normally incidental to the nature of this course, including risks that are not specifically foreseeable.

Release and Indemnity

In consideration of my use as a participant in all program activities, I, the undersigned user, agree to release and on behalf of myself, my heirs, representatives, executors, administrators, and assigns, hereby do release Southern District YMCA / Camp Lincoln, its officers, agents, and employees from any cause of action, claim, or demand of any nature whatsoever, including but not limited to, a claim of negligence, which I, my heirs, representatives, executors, administrators and assigns may now have, or have in the future against Southern District YMCA / Camp Lincoln on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to my (or my child's) participation in program activities whether that participation is supervised or unsupervised, however the injury or damage is caused, including, but not limited to, the negligence of Southern District YMCA / Camp Lincoln, its officers, agents, and employees. In consideration of my program participation, I, the undersigned user, agree to indemnify and hold harmless Southern District YMCA / Camp Lincoln, its officers, agents, and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatever arising out of or in any way related to my (or my child's) program participation. I hereby certify that I have full knowledge of the nature and extent of the risks inherent in the program activities and that I am voluntarily assuming the risks. I understand that I will be solely responsible for any loss or damage, including death, I sustain while participating in the program, and that by this agreement Southern District YMCA / Camp Lincoln is released of any and all liability for such loss, damage, or death. I further certify that I (my child) am in good health and have no physical limitations which would preclude my (or my child's) safe participation in program activities. I further certify I am of lawful age (18 years or older) and otherwise legally competent to sign this agreement or can provide the signature of my legal parent / guardian. I further understand that the terms of this agreement are legally binding and certify that I am signing this agreement, after have carefully read it, of my own free will. In witness whereof, this instrument is duly executed at Southern District YMCA / Camp Lincoln.

My initials here authorize and give full consent to YMCA Camp Lincoln to reproduce video, or sound recording taken during my program for use in promotional material	
My initials here confirm that I would like to receive e-mails from YMCA Camp Lincol programs including summer camp, family camp, vacation camps, and more.	n's variety of year-round Initials:
Signature of Participant, Parent, or Guardian:	Date: