

**CLIMBING TOWER, RAPELLING AND ZIP LINE**  
**PARTICIPANTS RELEASE OF LIABILITY**  
**PLEASE READ BEFORE SIGNING**

In consideration of being allowed to participate in any way in the Camp Garner Creek program, related events and activities, I \_\_\_\_\_ the undersigned participant, acknowledge, and agree that:  
(Print Name – camper/participant)

1. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISK, BOTH KNOWN AND UNKNOWN, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERS, and assume full responsibility for my participation; and
2. The risk from the activities involved in this program is significant, including the risk of permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, I realize that the risk of serious injury does exist; and
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and
4. I, myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS, THE ADVISORY BOARD, OF THE TENNESSEE DISTRICT CHURCH OF THE NAZARENE, CAMP GARNER CREEK, their officers, officials, agents, and/or employees, other participants, sponsoring agencies and sponsors used to conduct the event, WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, LOSS OR DAMAGE TO PERSON OR PROPERTY, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEE OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN FREELY AND VOLUNTARILY WITHOUT INDUCEMENT.

\_\_\_\_\_ AGE \_\_\_\_\_ DATE \_\_\_\_\_  
PARTICIPANT SIGNATURE  
NAME PRINTED \_\_\_\_\_ HOME PHONE ( ) \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_  
EMAIL ADDRESS (if applicable) \_\_\_\_\_

**FOR PARENT/GUARDIAN OF MINOR PARTICIPANTS:**

This is to certify that I, as parent/guardian with legal responsibility for this participant, have read and understand this agreement, and I consent and agree to his/her release as provided above, and on their behalf as well as for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent of the law.

\_\_\_\_\_  
Parent/Guardian Signature Relationship Date