



**Camp Bunn  
2015 PWC Program  
Participation and Hold Harmless Agreement**



Camp Bunn (Abraham Lincoln Council) will be conducting a program for PWCs during 2015. This program is conducted under the approval of the Boy Scouts of America. Scouts will be instructed how to ride and drive the PWC. Scouts will be taught PWC safety, drive on the training course, and then have open ride time in a designated area at Camp Bunn. Scouts are expected to abide by all safety rules and the instructions of the Camp Instructor(s).

I, the undersigned, give my child, \_\_\_\_\_, permission to participate in this program. I understand that participation in the activity involves a certain degree of risk. I have carefully considered the risk involved and have given consent for my child to participate in the activity. I understand that participation in the activity is entirely voluntary and requires participants to abide by the rules and standards of conduct. I release the Boy Scouts of America, the local council, the activity coordinators and all employees, volunteers, related parties or other organizations associated with the activity from any and all claims or liability arising out of this participation.

**For safety, my child and I agree that he/she will do the following or he/she will be removed from the program:**

1. Complete a Boater Safety Class taught prior to arrival at Camp Bunn.
2. Wear all safety gear at all times on or around the equipment.
3. Follow all the safety rules provided in the training during class.
4. Follow the instructions of the Camp Staff Instructor(s).
5. Maintain control of the PWC at all times and remain within the speed determined by the Camp Instructor(s).
6. Is 14 years of age as of the start of the class and will be in full compliance with all local state and federal guidelines, including age restrictions and original equipment manufacturer standards.

Because space is limited, any additional cost associated with participation in this program will not be refunded.

Participant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Print Name \_\_\_\_\_ Date: \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email address for survey purposes only: \_\_\_\_\_