



Big Oak Meadows

7266 Hayes Orangeville Road NE
Burghill, OH 44404

WAIVER AND RELEASE OF LIABILITY FORM

Print Participant Name

Print Group Name

Date of Event

Instructions: Please read this entire form carefully. Each participant and/or their custodial parent/guardian must read, complete, sign and submit this agreement to Big Oak Meadows before their scheduled event date. Without an appropriately signed form, the individual WILL NOT be permitted to participate or attend.

Acknowledgement of Risk and Responsibility:

A. There are elements of risk at any camp, recreation and retreat facility, both indoor and outdoor. These include, but are not limited to tripping, slipping, falling, uneven ground, stairs, risk associated with sports, aquatics, walking/hiking trails, team building exercises, kitchen, showers and bath equipment in connection therewith. This also includes anything related to volunteer labor, programmatic or non-programmatic events, as well as the use of any equipment or vehicles for such activities. There are also risks associated with elements of nature such as rocks, sticks, trees, wind, lightning, animal bites or attack, insect bites, elements that would cause an allergic reaction, etc. Therefore, I (which, along with "my", "me," "myself" and any minor child listed below for which I am the responsible/custodial/parent/guardian) recognize the fact the risks and hazards both known and unknown. And I/my child(ren) participate willingly and voluntarily and assume full responsibility for loss, personal injury, accidents, illness, including death that may be sustained by me/my child(ren) and I/my child(ren) also assumes responsibly for damage to or loss of personal property.

B. Big Oak Meadows is not required to provide supervision for groups or individuals using the facilities, equipment, or recreational activities while on the premise. I acknowledge that it is the responsibility of me/my child's group leaders to provide supervision for the group/individual at all times. Big Oak Meadows does not provide medical treatment to groups and individuals utilizing Big Oak Meadow property or facilities. It is the responsibility of the group leaders to bring/provide basic first aid if needed. We recommend that someone in your group be Red Cross certified. In case of emergency you must contact local medical personnel by dialing 911. I also acknowledge that I/my child have appropriate insurance or, in its absence, agree to pay all costs of rescue and/or medical services that might be incurred on me /my child(ren).

Release: I have read and do fully understand and accept the terms and conditions stated herein and acknowledge that agreement shall be effective and binding upon my heirs, assigns, personal representatives, executors, administrators, successors, and assigns, estate, and all members of my family including minor children.

Therefore, for myself/my child, I knowingly and voluntarily assume all risks involved in my/my child's participation on the premise and facilities owned by or leased to Big Oak Meadows and do hereby release and promise to defend, indemnify, and hold harmless, Big Oak Meadows, and all of its members, employees, volunteers, trustees, officers, independent contractors, and agents from any and all liability, damages, costs, and expenses arising out of bodily or psychological injury, or may occur as a result of participation in activities at Big Oak Meadows, whether such injury arise out of negligence of Big Oak Meadows, myself/my child, or otherwise.

*By signing this waiver, you are also agreeing to your photo/video being taken and used for promotional purposes for Big Oak Meadows published and distributed without compensation. If you do not agree to this, you must let your group leader know upon arrival of event.

Name of Participant (print)

Signature of participant (required)

Date

Name of Parent/Guardian Name

Signature of Custodial/Parent/Guardian

Age of participant (if minor)

(REQUIRED if minor)

Home Address

Phone