Camp Yorktown Bay

361 Camp Yorktown Lane Mountain Pine, AR 71956 501-767-2333



OUTDOOR RECREATIONAL ACTIVITIES CONSENT AND ASSUMPTION OF RISK

It is my desire to participate in the outdoor recreational activities provided by CAMP YORKTOWN BAY (CYB). I the undersigned, am fully aware of the risks associated with all outdoor recreational activities, which would include, but are not limited to, water activities, hiking, horseback riding, caving, rock climbing/rappelling, canoeing/rafting, and participating in the ropes course. I, the undersigned, am fully aware that it is possible for me to receive injuries to my body which could be permanently disabling or could even cause me to die.

To participate in these activities, I, the undersigned, hereby knowingly and intelligently assume the risks of harm and/or bodily injury to my person or property that are associated with or arise out of this activity. I, the undersigned, agree to not knowingly place myself or other persons in hazardous situations. I, the undersigned, also promise to abide by the rules, which are designed for my safety and agree to use all appropriate equipment (such as life vests and helmets) as specified by CYB.

I, the undersigned, assume responsibility for replacement or repair of equipment due to damages occurring during my rental.

I, the undersigned, realize that outdoor activities have inherent risks and knowingly accept and assume this risk, and agree to release CYB and its parent organizations, including but not limited to Arkansas-Louisiana Conference Association of Seventh-day Adventists and all of their officers, directors, employees, and agents, from any and all liability and responsibility for all injuries and damages. Further, I agree to indemnify and hold harmless, including but not limited to Arkansas-Louisiana Conference Association of SDA's and all of their officers, directors, employees and agents, for any and all actions, causes of action, claims or damages, damages in law, or remedies in equity of whatever kind, including the negligence of said organizations.

i, the undersigned, am years of age and have read	and understand this entire agreement.	
Signature of Applicant	 Date	

PARENT/OR GUARDIANS CONSENT. RELEASE. AND ASSUMPTION OF RISK AGREEMENT FOR

PARTICIPANTS UNDER THE AGE OF 18		
, the parent/guardian, hereby give my consent for all participar responsible, and whose names and ages are listed below. I have agreement and I (we) agree to be bound by it.	· •	
Signature of Applicant	Date	
Names and ages of minor chi	ldren	