



Guest Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name of Group: \_\_\_\_\_ Date of Group: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: Day: (\_\_\_\_) \_\_\_\_\_ Evening: (\_\_\_\_) \_\_\_\_\_ Mobile: (\_\_\_\_) \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: Day: (\_\_\_\_) \_\_\_\_\_ Evening: (\_\_\_\_) \_\_\_\_\_ Mobile: (\_\_\_\_) \_\_\_\_\_

### **Participant Agreement**

In consideration for the named person on this account ("Participant") being allowed to participate in activities at the Presbyterian Camps and Conferences, Inc. (the "Camp"), I hereby acknowledge and agree to this release of liability, waiver of legal rights, and assumption of risk under the following terms:

I acknowledge that participating in activities or presence at the Camp, including, without limitation, the attendance at or participation in any event held at the Camp facility (whether presented, hosted or sponsored by the Camp or a third party), involves participation in or observance of physical recreational activities that involve inherent dangers that no amount of care, caution, instruction or expertise can eliminate. The activities that the participant may participate in include, but are not limited to, challenge course activities, high ropes course activities and other high adventure activities including, but not limited to, boating/paddling, backpacking, rock climbing, mountain biking, and hiking. These activities can be a strenuous and require the Participant to be in good physical condition.

I acknowledge that participation in the activity described above involves risk to the participant (and to the participant's parents or guardians, if the participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, exposure to infectious/communicable disease, bodily injury, death, emotional injury, personal injury, property damage, and financial damage.

I certify that the participant does not suffer from any physical infirmities or illnesses which would affect the participant's ability to engage in these activities. I understand that during some of these activities, participant may be exposed to psychologically and physically challenging situations. I acknowledge that although the program has taken precautions to provide proper organization, supervision, instruction and equipment for each activity it is impossible for the program to guarantee absolute safety. Also, I understand that the participant and I share responsibility for safety of the participant, and I assume that responsibility. I accept responsibility for verifying the health of the participant and certify that the participant has no physical or psychological problems that would prohibit the participant's participation in this program.

I hereby release, waive, discharge, and covenant not to sue the Camp and any its affiliates, members, owners, managers, directors, officers, employees, trustees, agents, subsidiaries, affiliates, administrators, staff, directors, and all other persons involved with such entities (collectively, "Releasees") from any and all demands, claims, suits, losses or damages of any nature and kind on account of property damages or personal injury (including without limitation death or paralysis) caused or alleged to have been caused, in whole or part, by the negligence or willful acts of the Releasees (collectively, "Damages"). I hereby agree that if any provision of this Waiver and Release Form is held invalid or is prohibited, the balance of the document shall (notwithstanding such invalidity or prohibited provision) continue in full force and effect.

All disputes, claims, questions, or differences arising from, relating to or in connection with this Waiver and Release or the participant's participation in any activity at or presence at a Camp facility, including, without limitation, the enforceability or applicability of all or any portion of this Waiver and Release, shall be finally settled by arbitration administered by the American Arbitration Association in accordance with the provisions of its then current Consumer Arbitration Rules by a single arbitrator. The place of arbitration shall be in New Jersey. The arbitration shall be governed by laws of the State of New Jersey. I understand that

the decision of the arbitrator shall be final, binding and conclusive upon me and the Camp. The arbitrator shall not have the power to award any consequential or punitive damages. I agree to hold the existence, content and result of the arbitration in confidence, except to the limited extent necessary to enforce a final settlement agreement or to obtain or enforce a judgment on an arbitration decision and award. I ACKNOWLEDGE AND AGREE THAT THE INCLUSION OF THIS ARBITRATION CLAUSE SHALL IN NO WAY IMPAIR THE VALIDITY OR ENFORCEABILITY OF ANY WAIVER OR RELEASE OF LIABILITY SET FORTH HEREIN.

Participant's Signature (if at least 18 years old) or Parent/Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Things you should know about health services while you are at camp:**

- (a) In case of an emergency, we will call the local ambulance service. It takes at least 15 minutes for an ambulance to get to camp.
- (b) There will not be a nurse/doctor on site at all times. Johnsonburg's hospitality and program staff are trained in first aid and CPR.
- (c) There will be a basic first aid kit in each building.
- (d) There are two AEDs on site. Johnsonburg does not have portable oxygen on site.
- (e) There are several urgent care facilities, 2 hospitals, and pharmacies available to you in two different towns (Newton and Hackettstown). These are 15 minutes from camp

Last update: 9/4/24