



Staff Kayak Waiver & Release Form

PLEASE READ CAREFULLY!!!

I, _____ will attend and participate in any kayaking, related events and activities. In consideration of the services of Mid-Lakes Baptist Association & Deaf Youth Camp (DYC), its agents, owners, officers, volunteers, participants, and all other persons or entities acting in any capacity on its behalf, myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

I acknowledge and agree that:

1. I will wear protective and safety gear prescribed by Mid-Lakes Baptist Association & DYC, knowing, however, that protective gear does not and cannot guarantee physical safety.
2. I am at all time fully and solely responsible for my own safety and well being while engaging in activities offered or provided by Mid-Lakes Baptist Association & DYC, and in transit to and from such activities. I accept and assume all risks connected with activities offered and/or provided by Mid-Lakes Baptist Association & DYC.
3. I understand and acknowledge there are risks of personal injury, death, and property damage while participating in the instructional activities, and trips offered by Mid-Lakes Baptist Association. Including risks posed by travel to such activity. My participation in these activities is purely voluntary, and I elect to participate in these activities in spite of the risks.

Release of liability, waiver of claims and indemnity agreement:

In consideration of permission to participate in activities with Mid-Lakes Baptist Association and DYC, I hereby acknowledge and agree to the following by execution of this document:

1. I hereby release and hold harmless Mid-Lakes Baptist Association & DYC, its officers, directors, agents and volunteers from any liability whatsoever for any and all injury, disability, death, or loss or damage to person or property, whether caused by active or passive negligence or otherwise, as well as from any claims or causes of action that I, my estate, heirs, survivors, executors, or assigns may have for personal injury, property damage, or wrongful death arising from activities offered or provided by Mid-Lakes Baptist Association and DYC.
2. By my participation in these activities and for use of equipment, I hereby assume all risks and dangers and all responsibility for any losses and/or damages, whether caused in whole or in part by the negligence or other conduct of Mid-Lakes Baptist Association, DYC, agents, officers, directors, and volunteers, or by any other person.
3. I certify that I have no medical or physical condition which could interfere with my safety while participating in these activities, or else I am willing to assume, and bear the costs of, all risks that may be created, directly or indirectly, by such condition. I agree to wear a properly fastened personal floatation device at all times while in the water, and to use such other safety equipment as may be provided to me by Mid-Lakes Baptist Association & DYC.

4. I understand and agree that should emergency rescue evacuation become necessary, the expenses are my sole responsibility and not that of Mid-Lakes Baptist Association or Deaf Youth Camp.

*****Read this form completely and carefully.** You are agreeing to engage in a potentially dangerous activity. You are agreeing that, even if Mid-Lakes Baptist Association and/or Deaf Youth Camp uses reasonable care in providing this activity, there is a chance you may be seriously injured because there are certain dangers inherent in this activity which cannot be avoided or eliminated. By signing this form you are giving up your right and your right to recover from Mid-Lakes Baptist Association and Deaf Youth Camp in a lawsuit for any personal injury to you or any property damage that results from the risks that are a natural part of the activity. You have the right to refuse to sign this form, and Mid-Lakes Baptist Association & Deaf Youth Camp has the right to refuse to allow you participate if you do not sign this form.

I have carefully read this RELEASE OF LIABILITY AND WAIVER AGREEMENT, and fully understand it. I understand this is a release of waiver of liability and by signing this agreement I am giving up important legal rights.

Name (print): _____ Date: _____

Signed Name: _____ VP/Cell: _____

In case of emergency contact: _____ Phone: _____

Relationship: _____

If the above person is not able to be contacted, please give another person we may contact.

Other emergency contact: _____ VP/Cell: _____

Relationship: _____