



Camp Teepee Pole Authorization for Medical Emergency and Camp Activities

Box 52124, Edmonton Trail RPO, Calgary, Alberta, T2E 8K9 | 403-636-0757

Completed Form is Required at Check-In

I _____, as the legal guardian of the children listed below (herein called “the Children”), hereby acknowledge and agree that in consideration of being permitted to participate in Camp Teepee Pole (herein called “the Camp”) programs and activities:

1. I do hereby release, waive and discharge the Camp, its members, officers, directors, independent contractors, employees, volunteers and agents, all recourse, proceedings, claims and causes of action of any kind whatsoever, in respect of all personal injuries or property losses which I or the Children may suffer arising out of or connected with, the preparation for, or participation in, the aforesaid programs, races or activities EXCEPT where and to the extent such personal injuries or property losses arise out of the negligent acts or omissions of the Camp, its members, officers, directors, independent contractors, employees, volunteers or agents. This WAIVER AND RELEASE extends to all claims of every nature or kind whatsoever, foreseen or unforeseen, known or unknown.

2. I hereby acknowledge and agree that:
 - a. wilderness activities and outdoor camp programs are very dangerous, exposing participants to many risks and hazards.
 - b. as a result of the aforesaid risks and hazards, the Children, as a participant, may suffer serious personal injury, even death, as well as property loss.
 - c. some of the aforesaid risks and hazards are foreseeable, but others are not.
 - d. I nevertheless freely and voluntarily assume all the aforesaid risks and hazards, and that, accordingly, the preparation for, and the participation of the Children in the aforesaid programs, races and activities shall be entirely at my and their own risk.
 - e. I authorize the Camp staff or their designate to transport the Children as required for the camp operations and activities, understanding that only experienced drivers of at least 25 years of age will be used.
 - f. in the event of any injury or illness, I authorize the Camp staff or their designate to seek and obtain such emergency or medical services and transportation as may be deemed necessary at the time.
 - g. the Camp may use photographs or videos that I or the Children appear in for training and promotional purposes.
 - h. the Camp will keep my information on file and that my information will be kept confidential and not sold or given to any other organization except as required for medical or law enforcement purposes.
 - i. I carefully read the WAIVER AND RELEASE agreement, that I fully understand and accept its terms, and that I am freely and voluntarily executing the same.
 - j. this WAIVER AND RELEASE agreement is binding on myself, my heirs, my executors, administrators, personal representatives and assigns.

Parent / Guardian’s Name (please print)		Date	
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The Children (under 18 years old): (if you have more than 4, list the remaining ones on the back)

1	
2	
3	
4	