prairie camp

TOWER ACTIVITIES RELEASE FORM

(for participants not registered as Teen Camper or Summer Camper)

➲ IMPORTANT: This signed release must be turned in prior to any participation in the Tower, Swing, or Zip Line activities. If participant is under 18 years of age, a parent or legal guardian must give permission by signing this form.

Name of participant: Age: ❑ Male ❑ Female

Phone: Home # ( ) Cell # ( )

Emergency Contact Name & Phone #

Year of last tetanus shot: _____ List any medications the participant is currently taking:

List any other food or drug allergies:

List any medical issues participant has had in the last year:

I am aware that participation in an adventure-based course is physically and mentally demanding. I am fully capable of participating without causing danger to myself or others. I assume all risks associated with the course and agree to hold harmless Prairie Camp, the Missionary Church, North Central District, Inc. and/or employees as a result of participation in this activity. I also understand that photos or video of my participation may be used for promotional purposes of Prairie Camp. In the event that medical treatment is needed for participant, I give permission for such treatment as deemed necessary.

_____ _____

Signature of Participant Date

(Parent or Legal Guardian Signature if participant is under 18)