



SACANDAGA

Bible Conference and Retreat Center

I, _____ have chosen to **VOLUNTARILY PARTICIPATE** in a program conducted by SACANDAGA BIBLE CONFERENCE. Said program being conducted at the facilities of SACANDAGA BIBLE CONFERENCE situate at 191 Lakeview Road, Town of Broadalbin, County of Fulton and State of New York.

I am over the age of 18 years. I am a minor with an age of 18 and under. (Parent or Guardian **Must** Sign Below)*

As a **VOLUNTARY PARTICIPANT** in said program conducted by SACANDAGA BIBLE CONFERENCE, I acknowledge and agree as follows:

1. **Identification of Risks** - I understand that many of the programs at SACANDAGA BIBLE CONFERENCE may be conducted in the outdoors. Said programs will operate in all kinds of weather, in a wide variety of physical settings, and with other diverse participants. I further understand that during my **VOLUNTARY PARTICIPATION** I may be exposed to some risk and forces of nature.

2. **Acknowledgement of Risks** - I understand that although SACANDAGA BIBLE CONFERENCE has taken reasonable precautions to provide proper equipment, suitable facilities and trained staff, it is impossible to guarantee absolute safety against illness, injury or loss resulting from my **VOLUNTARY PARTICIPATION**.

I acknowledge the risk inherent in programs conducted at SACANDAGA BIBLE CONFERENCE and agree to assume that risk.

3. **Assumption of Personal Responsibility** - I agree that I am responsible for my safety while participating in the SACANDAGA BIBLE CONFERENCE program(s) and I am willing to assume that responsibility.

This means that I agree to follow any instructions and directions given me by the SACANDAGA BIBLE CONFERENCE staff and will seek to act carefully and with good judgment at all times.

I consent to a search of my personal belongings at any time by SACANDAGA BIBLE CONFERENCE personnel when they consider it to be in the interest of the SACANDAGA BIBLE CONFERENCE'S well-being and safety.

4. **Waiver, Release and Indemnification** - I understand that programs conducted on the SACANDAGA BIBLE CONFERENCE grounds and facilities may present challenging experiences with many diverse activities conducted in a predominately outdoor environment. Consequently, I waive, release and discharge any and all claims for damages that may occur as a result of my participation in program(s) at SACANDAGA BIBLE CONFERENCE. I hereby hold SACANDAGA BIBLE CONFERENCE, or any individual acting in an official or advisory capacity for SACANDAGA BIBLE CONFERENCE, harmless and release and indemnify SACANDAGA BIBLE CONFERENCE and its agents from any liability, claims and costs arising out of an accident or stressful incident during the program, except where caused by the gross negligence or wanton misconduct of any of the released parties.

I intend this waiver, release and indemnification to also apply to any relatives, heirs, next of kin, personal representatives, or assigns who might pursue any legal action or claim on my behalf.

5. **Photo Release** - I understand photos may be used of myself to promote the activities of the ministry. No identifying names will be used.

6. **Insurance** - I understand that this is my sole responsibility and release all persons and entities from providing this coverage.

I currently have valid medical/accident insurance. I currently DO NOT have valid medical/accident insurance.

I have read the above **Agreement** in its entirety and agree to the terms contained therein.

Participant's Name (please print) _____ Age _____

Participant's Signature _____ Date _____

***REQUIRED FOR ALL MINOR PARTICIPANTS WITH AN AGE OF 18 AND UNDER**

I have read the above **Agreement** in its entirety and agree to the terms contained therein on behalf of myself and the minor participant with an age of 18 and under.

Parent/Guardian (please print) _____ Relationship _____

Parent/Guardian Signature & Date _____ Contact Telephone _____