



Participant Name:

Program:



Participant and/or Parent/Guardian Consent and Release of Liability

PLEASE READ THIS SECTION CAREFULLY BEFORE SIGNING, and be aware that in participating in any program whether it be a program of Central Illinois Easter Seals, Timber Pointe Outdoor Center, a Contracted Partner Group, a Guest Rental Group, a Fund Raiser, the Teams Challenge Course, or the High Ropes Course, using or renting Timber Pointe Outdoor Center facilities and/or equipment, you will be waiving and releasing all claims for injuries, loss, or property damage that you (or your child) might sustain arising in any manner from programs, activities, events, and/or the use of the facilities or equipment. **This section must be filled out and signed by each participant (or their parent/guardian) or they will not be allowed to participate or use the facilities or equipment at Timber Pointe Outdoor Center.**

Acknowledgement of Risk or Injury Clause—As a participant in the program or event, I recognize the risk and acknowledge that there are certain risks of physical injuries, including death, damages, property damage, or loss which I (or my child) may sustain as a result of participating in any and all activities connected with such programs, events, and/or the use of the facilities or equipment.

Waiver of Claim for Injury Clause—I agree to waive and relinquish all claims that I (or my child) may have for injuries or damages, as a result of participating in the programs, events, and/or using the facilities or equipment, against National Easter Seals Easter Seals, Central Illinois, Easter Seals Timber Pointe Outdoor Center, and their officers, agents, servants, employees, and affiliates.

Release from Liability Clause—I do hereby fully release and discharge National Easter Seals, Easter Seals Central Illinois, Easter Seals Timber Pointe Outdoor Center, and their officers, agents, servants, employees, and affiliates from any and all claims for injuries, including death, damages, property damage, or loss which may have or which may in the future accrue to me (or my child) on account of participation in the program, events, and/or use of the facilities or equipment.

Indemnity and Defense Clause—I further agree to indemnify and hold harmless and pay defense costs and defend National Easter Seals, Easter Seals Central Illinois, Easter Seals Timber Pointe Outdoor Center, and their officers, agents, servants, employees, and affiliates from any and all claims resulting from injuries, including death, damages, property damage, and/or loss sustained by me (or my child) and arising out of, connected with, or in any way associated with the activities of the program, event, or the use of the facilities or equipment.

Consent to Medically Treat —While participating at Easter Seals' Timber Pointe Outdoor Center; if an accident should occur requiring medical and/or surgical treatment, I authorize Easter Seals' Timber Pointe Outdoor Center Executive Director or the designated responsible person to select and empower the local EMS system, nurses, physicians and/or surgeons to administer medical care to me. I absolve Easter Seals Timber Pointe Outdoor Center staff, nurses, physicians and/or surgeons from any and all liability for their acts rendered in good faith.

Consent to Medically Treat Minor—The undersigned, in case of emergency and in the event the undersigned cannot be reached by telephone, does hereby give permission for medical treatment by a physician or hospital selected by the Executive Director. Such permission shall include any and all medical treatment which is necessary or desirable in the absolute discretion of any such physician or hospital. **The undersigned recognizes the right of the Executive Director, in his/her absolute discretion, to terminate the undersigned's stay at any time due to disciplinary or medical actions which might jeopardize the camper's or others' health, safety, or well being at camp.** The undersigned further agrees to pick up the participant immediately upon being notified of such termination. If someone other than the undersigned is to pick up the applicant at the end of the camp session, such person must present **written** authorization from the undersigned.

Signature of Participant

Emergency Contact Name and #

Date

MINOR CONSENT TO PARTICIPATE & TREAT: I hereby give my permission for the participant (named above) to attend the program or event for which he/she is registering for and in the event of an accident/illness, **Timber Pointe Outdoor Center administration has my permission to secure emergency medical care as needed** until I can be reached.

Signature of Parent or Guardian of Minor Participant if participant is under the age of 18

Emergency Contact Name and #

Date