

# RELEASE OF LIABILITY FOR CHALLENGE COURSE ACTIVITIES



Any person participating in Challenge Course activities **must** have a Release of Liability Form signed by an adult.

Name of Participant

Date of Birth

Participating in any physical activity may be dangerous. Because of the inherent dangers of participation in such activities, it is extremely important that directions of the facilitator/instructor be followed. So that a facilitator/instructor may be properly informed, the following questions must be fully disclosed. Please put "n/a" if not applicable:

The following physical condition(s) might affect the participation:

The participant listed above has my permission to participate in the Camp El Tesoro Challenge Course. I understand that part of the Camp El Tesoro Challenge Course program and/or activities may be physically or emotionally demanding. I affirm that the participant's health is good, and that he/she/I is/are not under a physician's care for any undisclosed condition that bears upon his/her/my fitness to participate in Challenge Course activities. I understand that each participant must assume the risk of physical injury that could result from any of these activities.

As the parent/legally authorized representative of the above named camper – or for myself (if 18 or older and participating in the challenge course programs and/or activities), I am by this document representing that I have the authority to consent to all medical/surgical care and treatment of my child or myself. I hereby give my authorization and consent for staff members from Camp Fire and/or Camp El Tesoro to consent to the medical/surgical care and treatment of my child or me at my expense, including taking my child or me to an emergency room. It is my intent that this authorization shall apply to immunizations, as well as all other medical/surgical care and treatment and that this authorization be in effect while my child/I is/are participating in the Camp El Tesoro Challenge Course program/activities.

I understand that by signing this, I hereby release Camp El Tesoro, Camp Fire First Texas, its officers, board members, employees, agents, and all individuals assisting in the instruction and conduct of the Challenge Course program/activities from any and all liability. I have carefully read this Release of Liability and fully understand this document. A faxed copy of this consent shall be as valid as the original.

## IMPORTANT NOTE about participant restrictions:

- Participants must be at least 8 years old
- Participants may not weigh more than 250 lbs

Check one: \_\_\_\_\_ On behalf of myself

\_\_\_\_\_ as the Parent/Legally Authorized Representative of the minor child named above

Signature of Participant  
(If Participant is 18 or older)

Date of signature

Signature of Parent or Legally Authorized Representative  
(If Participant is under 18 years of age)

Date of signature

Address

City / State / Zip

Phone

Email

## Please return Release of Liability to:

Camp Fire First Texas Attn: Retreats & Rentals 2700 Meacham Blvd Fort Worth, TX 76137  
**Questions?** 817.831.2111 Fax 817.831-5070 Rentals@CampFireFW.org

Revised 6/7/2017