



Required completion for all T Bar M Camps & Retreats Guests

™ Acknowledgment and Assumption of Risk

I, the undersigned, hereby give permission for myself and/or all minor children (Participant) named below to participate in activities, including, but not limited to, off campus activities. I, the undersigned on behalf of myself and the Participant, acknowledge that during participation in program activities, certain risks and dangers may occur. I, the undersigned on behalf of myself and the Participant, understand that Center for Christian Growth, Inc. dba T Bar M Camps and Retreats (T Bar M) activities range from mild to strenuous and, like all recreation, they include inherent and other risks and dangers, which include but are not limited to the hazards of depending on other people, activities at various heights above ground, and the forces of nature, which can cause loss or damage to personal property, physical or psychological damage and/or bodily injury such as sprains, breaks, cuts, bruises, emotional trauma, illnesses, exposure to a communicable disease such as COVID-19, Coronavirus, or similar contagion, and the possibility of serious injury or death.

I, the undersigned on behalf of myself and the Participant, understand the activities and their risks. I, the undersigned, acknowledge that I, the undersigned on behalf of myself and the Participant will be able to ask questions of T Bar M staff regarding risks or dangers associated with T Bar M’s activities and environment (which may take place on the premises of T Bar M, a hosting church, or school). I, the undersigned on behalf of myself and the Participant, acknowledge that the Participant's participation in any activity is voluntary and Participant may decline to participate in any activity. I, the undersigned, on behalf of myself and the Participant, acknowledge and assume all risks of participation in T Bar M activities , inherent and otherwise, and whether or not described above or in the materials provided by T Bar M. While participating, I, the undersigned on behalf of myself and the Participant, agree that the Participant must abide by all the policies and procedures set before them in order to maintain the utmost level of safety.

™ Agreement of Release and Indemnity

Further, in consideration of the right to participate in T Bar M Activity, to the maximum extent allowed by law, I, the undersigned on behalf of myself and the Participant, release and agree not to bring any cause of action against Center for Christian Growth, Inc. dba T Bar M Camps and Retreats (T Bar M), its owners, directors, employees, associates, medical personnel, contractors or any related parties (the ‘Released Parties’) for liability or claims of any nature, including loss or damage to property, personal injury, exposure to communicable disease, such as COVID-19, Coronavirus, or similar contagion or death, suffered by Participant in an any way related to Participant’s enrollment, participation in, or transportation related to a T Bar M Activity. In addition, I, the undersigned on behalf of myself and the Participant, agree to indemnify the Released Parties (that is defend them, including satisfaction of liabilities, costs and attorney’s fees) from claims brought by Participant, members of Participant’s family and any other person arising out of Participant’s participation in, or transportation related to a T Bar M Activity. The claims which are the subject of these agreements of release and indemnity include those arising from the negligence of any Released Parties, except not where caused by a gross negligence or willful misconduct of the Released Parties. The activities intended to be covered by this Agreement of Release and Indemnity include activities on or off T Bar M premises, including transportation to and from T Bar M activities and on the T Bar M grounds or any premises utilized by T Bar M for any of its activities.

I understand that while participating in normal activities, I may be photographed/videotaped and that these photos and/or video footage may be used for promotional purposes.

In the event of any emergency, I hereby give permission to the physician selected by _____ to hospitalize, secure proper treatment, and to order injection, anesthesia, or surgery. (Group Leader’s name)

Participant Name

Signature
(Parent / Guardian must sign for participants under 18)

Date