

# SANDY COVE MINISTRIES ACTIVITIES WAIVER FORM

Name of person signing form: \_\_\_\_\_

Room/cabin/campsite number: \_\_\_\_\_ Dates at Sandy Cove: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Home phone: \_\_\_\_\_

I am signing this form for myself and on behalf of the following people, all of whom are members of my immediate family or under my legal care (my "family members"). I have authority to sign this form for all of my family members.

**All activities including:**

<u>Name</u>	<u>Age</u> <sup>1</sup>	
_____	_____	Marina (all ages)
_____	_____	Rock Wall (ages 8 and up)
_____	_____	Cargo Net (ages 8 and up)
_____	_____	Big Swing (ages 12 and up)
_____	_____	Zip Line (ages 12 and up)
_____	_____	Please note that not all activities are offered at all times – signing a waiver does not guarantee their availability during your stay.

<sup>1</sup> "A" for adults; age in years for children under 18.

- I give permission for my family members to take part in all activities (to include, but not limited to the zip line, big swing, rock wall, cargo net, Archery Tag, archery, slingshot, ax throwing, and marina) during our stay at Sandy Cove, as permitted by age restrictions.
- My family members and I all understand that these activities can be dangerous. People can be injured or even killed through human error, equipment failure, or for no known reason.
- I accept all responsibility for any harm that any of my family members may suffer through our participation in these activities. I agree to indemnify, defend and hold harmless Sandy Cove, whether the loss arises from the negligence of the camp or otherwise. We waive all claims for liability against Sandy Cove or anyone connected with Sandy Cove.
- I agree that all of my family members will follow the rules posted at each activity site, and will completely follow any instructions given by Sandy Cove staff people.
- My family members are physically and mentally fit for these activities. I authorize, and agree to pay for, any emergency medical care that my family members may need.
- **I have read this form carefully. I understand that by signing it I am giving up all claims of any kind for loss or injury in connection with the authorized recreational activities. I am doing this in exchange for my family's privilege of taking part in these activities.**
- Any claim or dispute arising from or related to this agreement shall be settled by mediation and, if necessary, legally binding arbitration in accordance with the *Rules of Procedure for Christian Conciliation* of the Institute for Christian Conciliation, a division of Peacemaker® Ministries (complete text of the Rules is available at [www.Peacemaker.net](http://www.Peacemaker.net)). Judgment upon an arbitration decision may be entered in any court otherwise having jurisdiction. The parties understand that these methods shall be the sole remedy for any controversy or claim arising out of this agreement and expressly waive their right to file a lawsuit in any civil court against one another for such disputes, except to enforce an arbitration decision.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_