

WAIVER OF LIABILITY, RELEASE & ASSUMPTION OF RISK

Group: Holy Trinity Greek Orthodox

Churchn 23 Dec 8 retreat

Time: 12/9/23 9:00 am 12:00 pm High Rop 12/9/23 9:00 am 4:00 pm Mixed Lov 12/9/23 1:00 pm 4:00 pm Low Rope

Email: lori@wwumccc.org

Challenge Programs and Courses

OWNER: WARREN W. WILLIS UNITED METHODIST CAMP AND THE FLORIDA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH ACTIVITY PARTICIPANT: DATES OF ACTIVITY: TYPE OF ACTIVITY: (circle one) Low Challenge Course - High Challenge Course - or Both Participant's and participant's parent(s)/guardian(s), if applicable) hereby acknowledge and understand that voluntary participation in Challenge Programs and courses involves the rist of injury and/or death. These risks and dangers may be caused by the negligence of the participant or the negligence of others. By participating in such activities, participant (and participant's parent(s)/guardian(s), if applicable) expressly assume all the risk, consequences and the liability related to this activity. Participant (and participant's parent(s)/guardian(s) if applicable) hereby release, forever discharge and hold harmless the Warren W. Willis United Methodist Camp, Florida Annual Conference of the United Methodist Church, it's officers and directors, employees, agents and volunteers from all actions, causes of action, injuries, claims, negligence, costs or expenses, arising out of or related to any such activities. Participant (and participant's parent(s)/guardian(s), if applicable) understands that this is a full and complete release of all injuries and damages which may be sustained as a result of my participation in the above noted activities. Participant Signature: Date: Parent or Guardian Signature: Date: (if participant is 17 years of age or younger) Parent or Guardian Name (please print):

4990 Picciola Rd. Fruitland Park, FL 34731 **Phone:** (352) 787-4345 • **Toll Free:** (866) UMCAMPS Ext.3 • **Fax:** (352) 787-8650