

# Guest Group Participation Agreement



**Sponsoring Organization:** Bair Lake Bible Camp

**Guest Organization:** \_\_\_\_\_

**Date of Activity:** \_\_\_\_\_

**Description of Activity:** All activities participant engages in while on the grounds of Bair Lake Bible Camp at 12500 Prang Street, Jones, Michigan.

Participant Information: To be completed by participant or authorized parent/guardian.

## PLEASE PRINT

Name of Participant: \_\_\_\_\_ DOB: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_ Grade if applicable: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Parent/Guardian Phone #: Cell/Home: \_\_\_\_\_ Work: \_\_\_\_\_

Emergency Contact Name and Phone #: \_\_\_\_\_

List all allergies and/or medical conditions: \_\_\_\_\_

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**For food related allergies, please contact our Food Services Manager at 269-244-5193 ext. 211, at least two weeks prior to arrival.**

Would you like to be added to our mailing list to receive BLBC news and information on upcoming events?

Yes \_\_\_\_\_ No \_\_\_\_\_ Email: \_\_\_\_\_

## MEDIA AGREEMENT:

Bair Lake Bible Camp has permission to use any photographs, videos, or other media of participant in promotional materials. **PARTICIPATION AGREEMENT:**

I acknowledge that participation in any BLBC activities involves risk to the Participant (and to Participant's parents or guardians if participant is a minor) and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage or financial damage.

In consideration for the opportunity to participate in the activity described above, the Participant acknowledges and accepts the risks of injury associated with participation in the Activity. The Participant (and Participant's parents or guardians if participant is a minor) accepts personal financial responsibility for any injury or other loss sustained during participation in the Activity, as well as for any medical treatment rendered to the Participant that is authorized by the Sponsor or its agents, employees, volunteers, or any other representatives (collectively referred to hereinafter as the "Activity Sponsor"). Further, the Participant (and Participant's parents or guardians if participant is a minor) releases or promises to indemnify, defend, and hold harmless the Activity Sponsor for any injury arising directly or indirectly out of the described Activity, whether such injury arises out of the negligence of the Activity Sponsor, the Participant, or otherwise.

If a dispute over this agreement or any claim for damages arises, the Participant (and Participant's parents or guardians if participant is a minor) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the Participant and the Activity Sponsor cannot agree upon such a process, the dispute will be submitted to a three member arbitration panel for resolution pursuant to the rules of the American Arbitration Association.

All information on this Agreement is considered confidential and will only be shared on a need to know basis.

\_\_\_\_\_  
Parent/Guardian Date \_\_\_\_\_ Signature of Participant or