Warda, TX 78960



Camp Lost Pines- Waiver and Release of Claims, Assumption of Risk and Consent to Medical Treatment

Texas Church of God of Prophecy CAMPING MINISTRY

Please read this document (the "waiver") carefully, as it affects your future legal rights. Please provide your initials on each page after reading. By signing below, you (on behalf of yourself or your minor child/ward and any personal representatives, assigns, heirs, and next of kin) agree and represent that you have carefully read and fully understand the Waiver and agreed to its terms.

Each individual attending the premises and/or participating in the activities of the campground must complete and sign the waiver. A parent/ guardian of a minor Attendee must complete and sign the waiver on behalf of the minor Attendee.

This waiver must be carefully read and signed in consideration of the opportunity of being a willing attendee permitted to enter the premises. As used herein, the terms "Releasees" is defined to include the following: the campground, its subsidiaries, affiliated organizations, owners, members, managers, directors, officers, past and present employees, agents, representatives, successors, volunteers, and assigns.

Between: The Church of God of Prophecy(owner). Camp Lost Pines (entity). Daniel Felipe (Presiding Bishop). Andrea Taylor (Camp Coordinator). Full legal names of the owners/ operators/ caretakers/ representatives of the campground (hereinafter the "Campground")								
Campsite Name: Camp Lost Pines	Camp Address: 6047 Hwy 77	City/ Town: Warda	State: TX	Zipcode <u>: 78960</u>				
(hereinafter the "Premises")								
Telephone number:	Email Address: camp@txcogop.com							
	-AND-							
Camper Name:		Date	of Birth: :					
(Campground visitor: hereinafter the "Attendee")								
Permanent Home Address:								
City:	State:	Zip Code	:					
Home Telephone NumberPhone:	Cell Telephone Number:							
PARENT/GUARDIAN/EMERGENCY CONTACT:								
Emergency Contact's Name:								
Emergency Contact's Phone: ()	Cell: ()	=					
Driver's License #Address of Driver's License the same as Permanent home address ?								
YesNo If NO, please p	rovide:							
Parent's/ Legal Guardian's Signa	ture Date	Camper's Signature		Date				



- 1. I expressly acknowledge and agree that my attendance and participation in the activities in the Campground may involve risk of serious injury and/or death and/or property damage.
- 2. I am fully aware of the risks and hazards inherent in my attendance at the Premises and participation in the activities of the Campground, and I voluntarily, knowingly, and freely assume all risks associated with participating in the activities of the Campground and entering the Premises, including, but not limited to the Campground owners, officers, coordinators, directors, managers, staff, volunteers, or visitors), falls, injuries, illnesses, infections, contact with others (including but not limited to the Campground owners, officers, coordinators, directors, managers, staff, volunteers, or visitors), navigating any and all obstacles and any defects of the premises.
- I represent and warrant to the Releasees that I am in good physical condition, am able to safely participate in the activities of the Campground and have no medical condition that would make my participation in the activities of the Campground more hazardous.
- 4. I consent to medical care and transportation in order to obtain treatment in the event of injury to me as the Campground owners, officers, directors, managers, staff, volunteers or other medical professionals may deem appropriate and understand that this Waiver extends to any liability arising out of or in any way connected with such medical treatment or transportation.
- 5. I understand and agree that I am expected to exhibit appropriate behavior at all times while I am attending the Premises and while I'm participating in the activities of the Campground to obey all local, state, and federal laws, both criminal and civil. This includes, generally ,respect for other people, equipment, facilities or property. I hereby and forever release, waive, discharge and covenant not to sue the Releasees for any injury or damage to me, my personal representatives, assigns, heirs and next of kin, for any claims, causes of action, obligations, lawsuits, charges, complaints, controversies, damages, costs or expenses of whatsoever kind, nature, or description, whether direct or indirect, present or future, in law or in equity, in contract or in tort, or otherwise, whether known or unknown, arising out of or connected with my (or my minor/ward's) participation in the activities of the Campground or while attending the Premises, howsoever caused, including, but not limited to being caused by the negligence of the Releasees.
- 6. I understand and agree that I may not bring weapons or illegal substances to the Premises.
- 7. I understand and agree that the Releasees are not responsible for any personal item or property that is lost, damaged or stolen while I am participating in the activities of the Campground or on the Premises. Additionally, I agree to indemnify the Releasees from any and all third party claims, howsoever arising, for any loss, liability, damage or cost they might incur, including, but not limited to, claims arising in whole or in part by my negligent or intentional acts or omissions while participating in the activities of the Campground or attending the Premises..
- 8. I recognize and acknowledge that there are hazards and risks of physical injury or illness to myself in attending the Premises and participating in the activities of the Campground and that not all such hazards or risks can be fully eliminated. I freely and voluntarily agree to assume the full risk of death, bodily injury or property damage, regardless of severity, that I (or my child/ward) may sustain as a result of my participation in the activities of the Campground or attendance at the Premises, howsoever arising, including, but not limited to, the active or passive negligence of the Releasees.

Parent/Guardian/Emergency Contact's Initials	
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THE 2019 NOVEL CORONAVIRUS (COVID-19) ACKNOWLEDGEMENT AND ASSUMPTION OF RISK

12. I am currently not experience in the last 14 days. Initials	ing COVID	19 symptoms nor have I had CO\	/ID-19 symptoms
13. I have not travelled outside advisory in the last 14 days. Initia	-	ted States or in an area under a t	ravel health
any person reasonably suspected	d of having merica in	ontact with any person with COV g COVID-19, or with any person v the last 14 days, or with any pers n the last 14 days. Initials	vho travelled
Government of the United State. Texas Department of Health we	s of Ameri bsite, or a	ees that I have not been advised be ica, the CDC, any certified health ny state or federal United States sible exposure to COVID-19. Initials	personnel, the government
		ds with respect to COVID-19 inhe ion in the activities of the Campg	
risk of death, bodily injury or pro child/ward) may sustain as a res	operty dan sult of my p he Premise	e the risk with respect to COVID- nage, regardless of severity, that participation in the activities of t es, howsoever arising, including, Releasees. Initials	l (or my he
Parent's/ Legal Guardian's Signature	Date	Camper's Signature	Date