



Assumption of Risk

All persons participating in Five Pines Ministries programs are obligated to read, understand, and agree to these policies. In the case of minor participants, a parent or legal guardian must agree and sign below. Five Pines programs include summer camps, retreats, private events, public events, youth gatherings, and MAX programs. Examples of activities include climbing tower, high ropes course, team-building initiatives, low ropes activities, swimming, snow tubing, and more.

The participant acknowledges activities at Five Pines Ministries involve dangers and risks, both anticipated and unanticipated. Certain risks cannot be eliminated without destroying the unique character of activity at Five Pines Ministries. The same elements that contribute to the unique character of these activities can be causes of loss and damage to equipment, clothing, and footwear, and accidental injury, illness, emotional injury, financial damage, or in extreme cases, permanent trauma or death.

Risks include, but are not limited to: the hazards of depending on other people, depending on ropes and other types of climbing equipment and being at various heights (ground to 55'). Participant also understands that by participating in the activities requested, they may be exposed to the elements of nature, including temperature extremes and inclement weather. Proper attire, including closed-toe shoes, is required.

Participant certifies and acknowledges that they are of the physical, emotional, and mental capability necessary for participation in these activities. Participant also understands that all adventure activities at Five Pines are under the philosophy of 'Your Challenge, Your Choice.' Participants may be encouraged by Five Pines staff and/or fellow participants to accept various challenges, but they maintain the right to decline any activity or continuation of any activity for reason of physical, emotional, or mental safety.

In consideration of the right to participate, I do hereby (or on behalf of my minor child) assume all the above risks and any other ordinary risk incidental to the nature of the program, including risks which are not specifically foreseeable, and will hold Five Pines Ministries, its staff and administration, and those of the sponsoring organization harmless from any and all liability, actions, causes of action, debts, claims, and demands of every kind and nature whatsoever, whether for bodily injury, property damage or loss or otherwise, which I now have (or participant has) or which may arise from or in connection with my (participant's) program. The terms hereof and my signature on this document shall serve as a release and assumption of risk and shall bind my heirs, representatives, executors and administrators, successors and assigns, and for all members of my (or participant's) family, including any minors accompanying me. I also state that I (or participant) am not under the influence of any chemical substance, including alcohol. I fully understand that any physical activity involves risks of injury. I understand that failure to follow directions given by the Five Pines staff completely may result in injury.

I hereby give permission to the medical personnel selected by the camp director to consent to emergency medical or surgical treatment and to routine, nonsurgical medical care of my child as named on the application. This form may be copied for camp use.

I hereby give permission for photos/videos/audio of participation to be utilized for promotional purposes.

The Parties to this Agreement understand and agree that Five Pines Ministries is a Christian ministry that believes that the Bible commands it to make every effort to live at peace and to resolve disputes with each other in private or within the Christian church (see Matthew 5:23-25; 18:15-20; 1 Corinthians 6:1-8). Therefore, the Parties agree that any claim or dispute arising from or related to this Agreement and/or the camp-camper-camper parent/ guardian relationship shall be settled by good-faith discussions with each other, followed by (if good-faith discussions are not successful), biblically-based mediation with mediators agreeable to the Parties, and finally, if necessary, legally binding arbitration in



Assumption of Risk

accordance with the Rules of Procedure for Christian Conciliation ('Rules') of the Institute for Christian Conciliation, a division of Peacemaker® Ministries (complete text of Rules at 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/or the employer-employee relationship 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.

I acknowledge Five Pines Ministries reserves the right to deny or end a participant's experience if Five Pines Ministries, in its sole discretion, determines the speech or conduct of the participant is contrary to Five Pines Ministries mission, vision, purpose, values, or statement of faith. Five Pines Ministries does not exist to provide accommodations; we provide experiences that challenge each participant to grow emotionally and spiritually. We do this by providing a staff and setting consistent with our mission, values, purpose and statement of faith. I agree the purpose of the participant's intentions is not in disharmony with Five Pines Ministries as described above. In the event Five Pines Ministries denies or terminates the participant's experience under the provisions of this paragraph, I agree the participant, parent, or guardian is still liable for its financial obligations under this Agreement.

Signature: _____ **Date:** ____ / ____ / 20____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: (____) _____ - _____ **Email:** _____

Participant's Full Name(s): (Members living in the same household may use the same form)

_____	_____
_____	_____
_____	_____
_____	_____

Name of Group: _____ **Date Attending:** ____ / ____ / 20____