

OUTDOOR MINISTRIES WAIVER AND ACTIVITY RELEASE

CAVE CAMP

Participants in Cave Camps will be camping in the out-of-doors. Campers may be exposed to unexpected rain storms, insects, animals, mud, damp or wet ground, primitive toilet facilities, and other inconveniences associated with out-of-doors living.

Participants in Cave Camps will be engaged in activities which are by their nature physically demanding. Therefore, all participants must be free of medical or physical conditions which might create undue risk to themselves or to others who depend upon them. Thus, one should participate in these activities only if free of any physical disability unless the disability will not prevent full participation. Physical strength is not necessary, although being in good condition will increase the enjoyment of Cave Camp experience. If there is any doubt about your ability to safely participate in these activities you should have a physical examination. Activity leaders will instruct all participants in rules and procedures which are specific to the exploration of wild caves and that are essential to the health and safety of all. Participants must be willing to follow these procedures at all times.

Participants in Cave Camps will be involved in activities in wild (non-commercial) caves. These caves have no lights nor pathways. Caves are on the average 52 degrees F and may be wet and/or damp. Participants will carry their own light sources, food, water, and safety equipment, since medical/rescue help could be hours away. Campers will need to follow all the rules and procedures for safe caving.

The risks associated with cave entrance, exploration, and study are described in detail in the Great Saltpetre Cave Preserve liability document which has been made available to all participants in our program. Other unknown or unanticipated risks may result in injury illness, or death.

CAMPER'S COVENANT

In recognition of being permitted to participate in Cave Camp, I hereby agree that I will not participate while under the influence of alcohol, controlled substances, or any medications, which could impair my physical or mental abilities. I will follow all the rules and procedures for safe caving. I will engage in no actions that could jeopardize myself or the well-being of others.

Camper's Signature _____ Date _____

ASSUMPTION OF RISK AND RELEASE OF LIABILITY

I have listed on my / my child's medical form any and all physical disabilities or conditions which might limit participation in the exploration of wild caves and related activities.

I have received a copy of the Liability Waiver document from Great Saltpetre Cave Preserve and I have read the description of risks associated with cave exploration which appear in that document.

In recognition of the risks of any camping and caving activity, **I therefore give my permission for the camper listed below to participate in Cave Camp**, and I release any and all rights or claims for damages against The District Board of the Church of the Brethren of Southern Ohio, the Outdoor Ministries Commission, and the staff and volunteers of Outdoor Ministries with regard to any and all injuries, loss, or damage suffered at or in any way connected with Cave Camp.

Campers' name (PRINT) _____

Signature of Parent or Guardian _____ Date _____

Event Name and Date _____

PLEASE DO NOT MAIL THIS FORM! BRING IT TO CAVE CAMP CHECK IN.

OVER, PLEASE

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RAPPELLING

Participants in Cave Camps sponsored by Outdoor Ministries and conducted in Rockcastle County, Kentucky, may also be involved in RAPPELLING as a part of their Cave Camp experience. Because of risks involved in climbing and RAPPELLING, parents are asked to provide separate authorization for campers to engage in the activity of RAPPELLING.

Whenever persons are engaged in the sport of climbing and/or rappelling there is a risk of all manner of injury, including serious injuries such as fractures, spinal and brain injury. Other risks include injuries from falling and impacting against holds, protruding ledges, edges or the ground. The risk exists for cuts, bruises, rope abrasion, entanglement. Additional risk may result from the use, misuse, non-use and failure of any equipment including, but not limited to ropes, slings, harnesses, climbing hardware, anchor points or any additional equipment or natural structures involved in RAPPELLING.

ASSUMPTION OF RISK AND RELEASE OF LIABILITY

I acknowledge that The District Board of the Church of the Brethren of Southern Ohio and the staff and volunteers of Outdoor Ministries does not warrant any Church-owned or personal equipment or the negligent use of any Church or personal equipment.

I have listed on my / my child's medical form any and all physical disabilities or conditions which might limit participation in the exploration of wild caves and related activities.

In recognition of the risks of RAPPELLING, **I therefore give my permission for the camper listed below to participate in RAPPELLING during Cave Camp**, and I release any and all rights or claims for damages against The District Board of the Church of the Brethren of Southern Ohio, the Outdoor Ministries Commission, and the staff and volunteers of Outdoor Ministries with regard to any and all injuries, loss, or damage suffered at or in any way connected with the activity of RAPPELLING during Cave Camp.

Campers's name (PRINT) _____

Signature of Parent or Guardian _____ Date _____

Event Name and Date _____

TRIP AND TRAVEL PERMISSION FORM

I hereby give permission for [camper's name] _____ to travel on public highways to Great Saltpetre Cave Preserve (Rockcastle County, Kentucky) and from there to a variety of caves (some on private property) and to other locations for the purpose of participating in Cave Camp. I understand that campers will be transported in privately owned vehicles and/or rented vehicles. I also understand that certain risks are present when people travel in highway vehicles.

Date _____ Signature of Parent or Guardian _____

PLEASE DO NOT MAIL THIS FORM! BRING IT TO CAVE CAMP CHECK IN.

OVER, PLEASE