



Mt. Cross Acknowledgement of Risk

LIABILITY RELEASE FORM

Participant's Name: _____ Date: _____

Group Name: _____

Adventure and challenge course programs (including High and Low Ropes Initiatives, Swimming Pool, Creek Walking, and/or Archery) involve a variety of activities that often include warm-ups, games, group initiatives and other rigorous physical challenges. Mt. Cross has worked hard to provide me with the proper equipment, trained facilitators and the necessary basic skills to be successful. However, I do understand that these activities are not without risk, and certain risks cannot be eliminated without destroying the unique character of the activities. I am aware that my participation in these activities may cause damage to my equipment, accidental injury, illness or in extreme cases, permanent injury or death.

I accept full responsibility for the inherent risk identified herein and those risks not fully identified. My participation is fully voluntary, no one is forcing me to participate, and I elect to participate with full knowledge of the risks involved.

I acknowledge that engaging in these activities may involve a degree of skill and knowledge, and that as a participant it is my responsibility to pay attention and ask questions, to be sure that I clearly understand everything I must know to ensure my own safety and the safety of others.

I certify that I am fully capable of participating in all adventure and/or challenge course activities. Therefore, I assume full responsibility for myself and my actions. I will not hold Mt. Cross or any staff member responsible for bodily injury, death, or loss/damage to any personal property as a result of my participation in these activities. I certify that I am twelve (12) years of age on or before the date of participation in any high ropes activity.

For all participants (including minors): I have carefully read and clearly understand and accept the terms and conditions of this agreement. I acknowledge this agreement as effective and binding between myself and my heirs and Mt. Cross.

Participant's Signature: _____ Date: _____

For participants under age 18: I have carefully read and clearly understand and accept the terms and conditions of this agreement. I certify that I am the parent/guardian of the above named minor participant and I give consent for his/her participation in Mt. Cross adventure and/or challenge course activities.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Name: _____

For Adult Participants/Group Leaders: I understand that as an adult leader for the group attending Mt. Cross, I am responsible for providing direct supervision while transporting youth to and from Mt. Cross as well as for the duration of our stay at Mt. Cross. I know that I will be staying in dorm style housing and (for Mt. Cross retreats) will be responsible for nighttime supervision and for maintaining program curfew. I am also responsible for, and competent to handle, any medical needs that may arise in which a youth needs medical attention or administration of medicine prescribed by a medical doctor. I, or an adult member of our group, will review and will carry completed Medical Release and Acknowledgment of Risk forms at all times and, if necessary, will be the primary transportation for any medical treatment.

Adult/Group Leader Signature: _____ Date: _____