

**CHALLENGE COURSE - TEAM BUILDING
PARTICIPANT FORM**



Please complete BOTH SIDES of this form and attach a photocopy of your insurance card. Bring this form with you to Ridgecrest. For more information contact 828.669.4844.

General Information:

Name: _____

Address: _____ City: _____

State: _____ Zip: _____ SS#: _____

Age: _____ (must be 10 years or older) Date of Birth: ____/____/____ Sex: Male Female

Home Phone: (____) _____ Work Phone: (____) _____

Name of Church or Group:

Address: _____ City: _____

State: _____ Zip: _____

In case of an emergency, Contact Name: _____

Day Phone: (____) _____ Night Phone: (____) _____

Medical Profile:

Generally participant's health is: (Check One) _____ Excellent _____ Good _____ Fair _____ Poor

If Fair or Poor, please explain your condition:

List any medical difficulties for which you are CURRENTLY being treated:

List any medication you are CURRENTLY taking:

List any medicines or substances to which you are ALLERGIC:

Family Physician(s): _____

Physician's Address: _____

Date of Tetanus Immunization ____/____/____

Insurance Co. _____ Policy or Group # _____

Address: _____

Subscriber Name: _____ Subscriber # _____

Place of Employment _____ Work Phone: (____) _____

Subscriber Occupation: _____

**CHALLENGE COURSE - TEAM BUILDING
PARTICIPANT FORM**



Please complete BOTH SIDES of this form and attach a photocopy of your insurance card. Bring this form with you to Ridgecrest. For more information contact 828.669.4844.

Assumption of Risk/Authorization for Treatment/Release of Claims

The undersigned hereby acknowledges that participation in outdoor programs and recreational activities, including challenge courses, involves an inherent risk of physical injury caused by, but not limited to, falls, collision with persons or objects, being struck by falling objects, and exertion, and assumes all such risks. Dangers related to such activities include, but are not limited to hypothermia, dehydration, heat exhaustion, heat stroke, broken bones, strains, sprains, cuts, scrapes, bruises, concussions, and heart attacks. Each participant in these activities should realize that there are risks and dangers inherent in them, and also in the training for, participation in, and travel to and from such activities. It is the sole responsibility of each participant to participate only in those activities for which he or she has the prerequisite skills, qualifications, preparations and training. I understand the rules of play for the activity in which I intend to participate and will comply with all rules and regulations. If I observe any unusual or unnecessary hazard during my participation, I will bring such to the attention of the nearest official as soon as practical.

In consideration for acting as a participant in the event(s) identified herein, I, the undersigned, do for myself, or for and on behalf of my minor child, under 18 years of age, hereby give permission for medical personnel to administer medical care to me or my minor child as necessary. I, the undersigned, for myself, or for and on behalf of my minor child under 18 years of age, do hereby release and forever hold harmless the directors, officers, employees, agents, contractors and affiliates of LifeWay Christian Resources of the Southern Baptist Convention ("LifeWay"), Ridgecrest Conference Center, camp or event sponsors and state conventions, from any and all claims or demands for personal injury, sickness, and death, as well as property damage and expenses, of any nature whatsoever, incurred by myself or my minor child under 18 years of age. I further assume personal responsibility for any loss of or damage to property incurred by myself or my minor child under 18 years of age by theft or otherwise. I also assume full personal responsibility for all medical bills for myself or my minor child less than 18 years of age. I agree to indemnify LifeWay Christian Resources and Ridgecrest Conference Center from any and all claims and demands for personal injury, sickness and death as well as property damage and expenses of any nature whatsoever incurred by me or my minor child less than 18 years of age due to dismissal from the event. I further hereby assume responsibility for all transportation costs related to any such dismissal from the event of me or my minor child less than 18 years of age.

Photo/Video Release

I understand that as a participant, I or my child under 18 years of age may be photographed or videotaped during normal Challenge Course Games/Activities and these photos/videos may be used in promotional materials.

I, the undersigned, do hereby verify that the General and Medical information on the reverse of this form is correct.

Participant's Signature _____ Date: ___/___/___

The portion below must be signed by a parent or guardian if participant is a minor.

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree not only to his/her release of LifeWay Christian Resources of the Southern Baptist Convention and LifeWay Ridgecrest Conference Center but also to release and indemnify the releases from any and all liabilities incident to his/her involvement in Challenge Course Games/Activities for myself, my heirs, assigns, and next of kin.

Parent/Custodial Signature _____ Date: ___/___/___

Phone () _____

Notary Public

On this the ___ day of _____, 20____, personally appeared before me _____, personally known by me, and in my presence executed the within and foregoing permission and release form. Witness my hand and official seal this ___ day of _____, 20____. My Commission expires _____.

_____ Notary Public.

The signature of adult participants do not require a Notary Seal. When the participant is minor, the signatures of the parent or guardian require a Notary Seal.