**LIABILITY RELEASE AND MEDICAL TREATMENT AUTHORIZATION**

In consideration of **Short Mountain Bible Camp** furnishing services, transportation, and/or equipment to enable my child, children or ward to participate in various outdoor activities including hiking, camping, canoeing, kayaking, horseback riding, and similar activities together with transportation to and from the activities, we agree as follows:

We fully understand and acknowledge that outdoor recreational activities have:

1. inherent risks and dangers associated with the activity and use of equipment;
2. my child’s, children’s or wards participation in such activities and use of such equipment may result in injury or illness but not limited to bodily injury, disease, strains, fractures, partial and/or total paralysis, aliments that could lead to serious disability, and even death;
3. these risks and dangers may be caused by accident or even the negligence of the teachers, agents, officers, employees or board members of **Short Mountain Bible Camp**, or the negligence of other participants;
4. risks and dangers may arise from foreseeable or unforeseeable causes including but not limited to guide decision making, including a misjudgment of terrain, weather, trail or river route location, water levels, and the risk of falling off horse, hazards, and dangers are an integral part of the recreational activities that may take place in a wilderness or outdoor setting;

5) COVID-19 Provisions

Symptoms of COVID-19 include:

• Fever

• Fatigue

• Dry Cough

• Difficulty Breathing

I agree to the following:

• I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above within the last 14 days.

• I affirm that I, as well as all household members, have not been diagnosed with COVID-19 within the past 30 days.

• I affirm that I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the past 30 days.

• I affirm that I, as well as all household members, have not traveled outside of the country or to any city considered to be a "hot spot" for COVID-19 infections within the past 30 days.

• I understand that **Short Mountain Bible Camp** cannot be held liable for any exposure to the COVID-19 virus and any other infectious diseases caused by misinformation on this form or the health history provided by any participant or staff member at **Short Mountain Bible Camp.**

6) by allowing my child, children or ward, and/or myself to participate in these activities and use equipment for the activities, we hereby assume all risks and dangers and responsibility for any losses and/or damages, including COVID-19 exposure and any other infectious diseases, whether caused in whole or in part by the negligence or other conduct of the teachers, agents, officers, employees or board members of **Short Mountain Bible Camp** or by any other person affiliated with the camp.

We, on our behalf and on behalf of our personal representative and heirs together with on behalf of my child, children or ward hereby voluntarily agree to release, waive, discharge, hold harmless, defend and indemnify **Short Mountain Bible Camp**, its teachers, agents, officers, employees or board members from any and all claims of actions/ losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of the outdoor activities my child, children or ward engages in with **Short Mountain Bible Camp** in the course of participation in camp activities, retreats, or any other attendance or use of camp facilities.

The consideration for this Authorization is permission given by **Short Mountain Bible Camp** to allow my child, children or ward to participate in the outdoor activities and to utilize camp facilities.

The undersigned further authorizes **Short Mountain Bible Camp** or its agents to seek medical treatment on behalf of my child, children or ward in the event of an injury or illness, and medical providers are authorized to rely upon this Authorization as authority for said treatment. The undersigned will indemnify **Short Mountain Bible Camp**, its teachers, agents, officers, employees or board members for any medical expenses incurred as a result of an injury or illness suffered while traveling to or from said outdoor events or which occur during the course of the events, this indemnity is not limited to the medical expenses actually sought by **Short Mountain Bible Camp** or its teachers, agents, officers, employees or board members.

**I HAVE READ THE ABOVE WAIVER, RELEASE AND MEDICAL AUTHORIZATION. BY SIGNING SAID, IT IS MY INTENTION TO EXEMPT AND RELIEVE SHORT MOUNTAIN BIBLE CAMP OF WOODBURY, TENNESSEE, FROM ANY LIABILITY FOR PERSONAL INJURY, ILLNESS, PROPERTY DAMAGE, WRONGFUL DEATH CAUSED BY NEGLIGENCE OR ANY OTHER CAUSE AND FROM ANY AND ALL LIABILITY FOR EXPOSURE TO OR HARM FROM COVID-19.**

**PARENTS or WARD**

**SIGNATURES**:

PHONE:

**NAME & ADDRESS**

**OF PARTICIPANT**:

(Camper)