## City of Kingsport - Bays Mountain Park

## PERMISSION SLIP FOR PARTICIPANTS OF CAMP BAYS MOUNTAIN (Maximum Weight Limit on Zip Line is 275 lb)

This permission slip allows the campers of Camp Bays Mountain, Inc (the United Methodist Camp in Kingsport) to participate in Hawks Nest, and the Flying Squirrel Zip Line and/or Low Course.

Participant's Name:			Date of Birth:	
Address:				
City	State	Zip	Telephone:	_
Parent's Name & Address	(if under 18):			
Emergency Contacts (2):				_
Park. I understand and agree the we/they are climbing on the Adractivity which could result in service potential, albeit generally low inclinations, fractures, concussion unknown risks, and I agree to an my child, my property or others a damage, injury, or loss is caused or agents. I understand that Advand physically fit to do so, and activities through appropriate meregulations and safety instruction agree that I have read and revisionagree that I have read and revisional activities at the Bay substantial consideration for the Ropes Course, and I waive any any litigation between the partie LIABILITY is instituted or become other recovery and costs, its reacourts. This PERMISSION SLIP	nat the City of Kings venture Course. I urious injury to me or elsewhere. Inherent recidence; for stressfuns, or other life thread do hereby assume as a result of or arisinal by accident or the renture Course activit I assume all responsedical personnel. I am given verbally or iewed these rules with many many many many many many many many	port has no conderstand and restand and restand and restand and restand and restand and restand in situations, featening injuries of the search of the searc	e the City of Kingsport to allow me or activities on the Adventure Course at Bay ontrol over, or responsibility for me or my diagree that there are inherent risks involouthers, whether those activities occur at oating in activities on a Adventure Course far, anxiety, slips, falls, rope burns, scrape for activities at the High Adventure Course when the City of Kingsport, its officers, directors, by be performed by persons medically, psychetring my child's ability to perform Adventure and/or my child is responsible for following Mountain Park Adventure Course Rules Stagree to indemnify and hold harmless officers, directors, employees, and agents a Kingsport Bays Mountain Park, its officers mage resulting from my child utilizing and parse. I understand and agree that this reallow me and/or my child to participate it lid or unenforceable for any reason. In the sion of this PERMISSION SLIP AND REI or parties shall be entitled to recover, in add in such litigation, in both the trial and in a remain in full force and effect until express out Bays Mountain Park managing employed.  Office Use Only:  Helmet #	s Mountain child while ved in this the City of include the es, sprains, r known or loss to me, ether such employees, chologically ure Course g all rules, heet, and I the City of and forever, directors, earticipating elease is a n the High event that LEASE OF ition to any II appellate sly revoked
DATE: Adult/Parent Sig	ınature:		Harness #	