

ACTIVITY RELEASE FORM

I hereby acknowledge that I have voluntarily given permission for the child noted below to participate in all activities checked below at Checkpoint Bible Camp. I understand that these activities involve numerous risks of injury that are my responsibility. And I assume these risks. To participate in these activities I hereby release from any legal liability Checkpoint Bible Camp or Camp Buffalo for any injury or death caused by or resulting from my child's participation in this activity. I agree not to sue, claim against, attach against, attach the property of or prosecute Checkpoint Bible Camp, the IFCA Indiana Regional, or Camp Buffalo. This contract shall be legally binding upon me, my heirs, my estate assigns, legal guardians, and my personal representatives.

I have carefully read this agreement and fully agree with its contents.

THIS IS A RELEASE OF LIABILITY

(Do not sign if you do not understand or do not agree with its terms.)

Initial all activities you (the parent) approve:	
Rifle shooting (Instruction and supervision with	
certified instructors).	
Archery (Instruction and supervision with	
certified instructors).	
Swimming (with certified lifeguard present)	
Canoeing	
Float Trip (Middle School Camp ONLY)	
OK to use photos of my child(ren) for camp publici	ty
to local churches.	
I hereby give my child(ren),	, permission to
participate in the activities checked above at Checkpoint Bible Camp du	ring the camp.
Parent / Guardian, Date	