

Crossroads Camp Courageous

2026

Camper/Young Leader Release Form

I, _____, (*parent/guardian*), the undersigned do agree to release fully and completely waive any claim which may arise against **Crossroads Church**, its employees, trustees, officers and volunteers. This waiver of rights shall be effective immediately and shall continue to be in force while on field trip and on church grounds. This release specifically includes all claims and demands of whatever nature, actions and cause of actions, damages, costs, loss of services, expenses and compensation on account or in any way growing out of personal injuries, illnesses, and/or property damage having already resulted or to result at any time in the future, whether or not they arise following the execution of this release. I also give my consent for the camp-appointed authority to administer proper medication as needed. In the event I cannot be notified of necessary emergency surgery or other medical treatment for my child, I give my permission for the attending physician to treat my child/children, in the manner he/she recommends. I hereby irrevocably consent to and authorize the unrestricted use and reproduction by you or anyone authorized by you, of any and all photograph and/or video images which you have taken of the camper listed above, for use within the scope of Crossroads Church. My child has permission to travel with the Crossroads Church group under the leadership of its director and other adult leaders. If on one of camp days my child/children cannot go on the field trip designated, I understand that my child will not be allowed to attend camp that day due to all supervision will be on the trip.

(PARENT'S/GUARDIAN'S SIGNATURE REQUIRED)

(DATE)

Crossroads Camp Courageous

2026

Adult Release Form

I, _____, the undersigned do agree to release fully and completely waive any claim which may arise against **Crossroads Church**, its employees, trustees, officers and volunteers. This waiver of rights shall be effective immediately and shall continue to be in force while on field trip and on church grounds. This release specifically includes all claims and demands of whatever nature, actions and cause of actions, damages, costs, loss of services, expenses and compensation on account or in any way growing out of personal injuries, illnesses, and/or property damage having already resulted or to result at any time in the future, whether or not they arise following the execution of this release. I also give my consent for the camp-appointed authority to administer proper medication as needed. In the event I am not able to respond for necessary emergency surgery or other medical treatment for myself, I give my permission for the attending physician handle my medical treatment, in the manner he/she recommends. I hereby irrevocably consent to and authorize the unrestricted use and reproduction by you or anyone authorized by you, of any and all photograph and/or video images which you have taken of the camper listed above, for use within the scope of Crossroads Church.

(YOUR SIGNATURE REQUIRED)

(DATE)

STAFF Int. _____