

Camp Shamineau, Shamineau Ranch and Shamineau Adventures
Minor with Guest Group Release Form

Individual Covered by this release (*please print*):

First Name: _____ Last Name: _____

Acknowledgement of Risk, Medical and Media Release

I have chosen to allow my child to attend the Shamineau Ministries programs in part because of the activities they offer. I understand and acknowledge that participation in the activities offered by Shamineau Ministries (including but not limited to rock climbing, hiking, swimming, the blob, snow-shoeing, cross-country skiing, high and low ropes course elements, riflery, horseback riding, mountain boarding, skateboarding and rollerblading, climbing the ice tower, or artificial indoor climbing wall) entails both known and unanticipated risks of harm which could result in physical or emotional injury, paralysis, death, or damage to the participant, to property, or to third parties. I understand and acknowledge that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. I further understand and acknowledge that the risk of harm inherent in these activities may be increased by factors beyond the control of Shamineau Ministries, including but not limited to the weather and elements, equipment manufacturer's malfunction and a participant's fitness and abilities. I hereby authorize the Shamineau Ministries staff to secure medical treatment for my child if necessary. I further authorize the camp to use photos or videos taken of my child at camp for Shamineau Ministries promotional purposes. At no time will camp photos be used by unrelated organizations.

(Signature of Parent or Guardian)

(Date)