

Camp Wesley Woods
Participant Information Disclosure
Consent and Release

Participant's name: _____

I wish to participate in a Camp Wesley Woods, Inc. adventure camping/recreation event.

I acknowledge that I am fully aware that the activities associated with this event entail certain inherent risks including damage to property, personal injury, and even death. In consideration for being permitted to participate in this activity, I agree to assume all such risks and hereby release and discharge Camp Wesley Woods, Inc. and Holston Conference Camp and Retreat Ministries, Inc., its officers, sponsors, trustees, employees, agents, and other aids and/or volunteers from any and all liability for any and all damage, loss, injury, or death of every kind and nature whatsoever which in any way arises out of my participation in this activity.

Event: _____ Date: _____

Participant's Signature

Parent/Guardian Signature (participant under 18)