

**CAMP WHITE BRANCH**  
**Association of the Churches of God in Oregon, Inc.**  
Waiver and Release Agreement

I wish to participate in recreational activities to be made available to participants at Camp White Branch including such activities that may be hazardous or otherwise involve a risk of physical injury.

I expressly assume any and all risks of injury or death, whether known or unknown to me at this time, arising from or relating to these activities. I waive and release any and all actions, claims, suits or demands of any kind or nature whatsoever against Camp White Branch, the Association of the Churches of God in Oregon, Inc. and its corporate affiliates, officers, employees, agents, sponsors, volunteers or representatives of any kind arising from or relating in any way to my voluntary participation in these activities. This release is also intended to include all claims of my family, estate, heirs, personal representatives or assigns.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_  
(Must be 18 or older)

Print Name: \_\_\_\_\_

**FOR PARTICIPANTS UNDER THE AGE OF 18**

I am the parent or legal guardian of the child whose name and signature appear above. I have read and understand this Waiver and Release Agreement, and consent on behalf of the participant to its terms.

Date: \_\_\_\_\_

Camper Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Print Parent/Guardian Name: \_\_\_\_\_