

# CAMP WALTER SCOTT VOLUNTEER RELEASE AND WAIVER FORM

*Please Read Carefully and Sign. Those under 18 require a signature from a parent or legal guardian.*

I acknowledge that I am engaging in volunteer activities, or any other activity of any nature (hereinafter "volunteer activities") with Camp Walter Scott (hereinafter "CWS") and that I am aware of the potential for property loss and personal injury while engaging in volunteer activities.

I assume all responsibility for any and all property damage or personal injury while participating in any volunteer activities while at CWS. I release CWS and the Christian Church in Illinois & Wisconsin (hereinafter "CCIW") from all liability of personal, injury, illness, death, or property damage occurring from volunteer activities while at CWS. I covenant and agree to indemnify and hold harmless CWS and/or CCIW, their respective officers, directors, employees, agents, members, and volunteers from any and all claims and demands related to any volunteer activities.

I understand that I am not entitled to worker's compensation benefits for any issue related to CWS. I also, on behalf of myself, my heirs, executors, administrators, and assigns, hereby release, waive, discharge, and covenant not to sue CWS, CCIW and/or their respective officers, directors, employees, agents, members, and volunteers for any claim, cost (including but not limited to attorney fees), cause of action and/or liability which arises from any volunteer activities while at CWS.

I currently have no known physical or mental condition that would impair my capability for full volunteer participation with CWS as intended or expected of me. CWS and/or CCIW does not have the responsibility of providing health, medical, or disability insurance to me/on my behalf. I understand that it is my responsibility as a volunteer/guest of CWS to have my own medical /health insurance benefits.

In addition, I hereby grant CWS, CCIW and each of their respective affiliates, partners, or agents, permission to use, publish, broadcast, and/or copyright the use of the Volunteer's name, image, likeness, and/or voice in its current form or modified in any way in any and all advertising, promotional, or other materials based upon or derived from Volunteer Activities.

Further, I expressly agree that this Volunteer Release, Waiver of Liability, and Indemnification Agreement (hereinafter "Agreement") is intended to be as broad and inclusive as permitted by the laws of the State of Illinois. If any portion of this Agreement is held to be invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I have carefully read the foregoing Agreement, and understand the contents of the same. I sign this Agreement as my own free act.

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Name of Volunteer

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Signature of Volunteer

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Date

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Name of Parent of Volunteer, if under 18

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Signature of Parent of Volunteer, if under 18

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Date

Camp Walter Scott  
15290 E 300th Avenue  
Dieterich, IL 62424  
[www.campwalterscott.org](http://www.campwalterscott.org)

Christian Church in Illinois & Wisconsin  
401 W Jefferson Street  
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