



**Waiver and Release**  
**For attendance and participation at Cale: Camp and Conference**  
**Center**

**Please read carefully before signing.**

The undersigned knows and understands that participation on the grounds of Cale and in Cale activities includes an element of risk, and that I should not participate unless I am medically able and physically capable. I assume any and all risks associated with all activities including, but not limited to illness, traveling to and from activities themselves, and the condition of the premises.

Having read this waiver and knowing these facts, and in consideration of monies paid for participation, I hereby for myself, my heirs, executors, administrator or anyone else who might make claims on my behalf, covenant not to sue, and waive, release and discharge Camp Cale and parent organization, Chowan Baptist Association, its officers, agents, employees, volunteers, and any other personnel in any way assisting or connected with this activity from any and all claims or liability of any kind or nature whatsoever arising out of my participation in this activity even though that liability may arise out of negligence or carelessness on the part of the persons or parties named in this waiver.

Further, the undersigned consents and authorizes Camp Cale also known as Chowan Baptist Association on my behalf to obtain any necessary medical treatment or hospitalization or such other care necessary for the health and welfare of the named participant, and the undersigned agrees to be responsible for and pay the costs of such medical treatment or hospitalization that is not covered under the liability insurance of Camp Cale/ Chowan Baptist Association.

**I have read this waiver and release, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.**

Participant Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Participants under age 18 must have parent/guardian signature:**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above.

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