

RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

(Family Camps/Retreats)

I execute this Release, Indemnification and Hold Harmless Agreement (“Agreement”) on my behalf and on behalf of my spouse, children and other family members (my “Family”) who are attending the family camp/retreat (“Camp”) with me at Lakeview Ministries on the dates of _____. I certify that I am at least 18 years of age and the custodial parent and/or legal guardian of my child(ren) and have full legal authority to execute this Agreement on behalf of my Family, my heirs, representatives, successors, executors, administrators and assigns.

I agree, on behalf of each member of my Family in attendance at Camp, my heirs, representatives, successors, executors, administrators and assigns, to FOREVER RELEASE, INDEMNIFY, DEFEND, AND HOLD HARMLESS South Central Lutheran Camp Association of Indiana, Inc., doing business as Lakeview Ministries, and its agents, servants, employees, volunteers, patrons, officers, and directors (collectively, “Lakeview”), from any and all actions, claims, demands, suits, liabilities, assertions of liability, losses, costs, judgments, and expenses, including but not limited to attorney fees, reasonable investigative and discovery costs, and court costs, which in any manner may arise or be alleged to have arisen, or resulted, or alleged to have resulted, from (i) the participation of any member of my Family in Camp, or (ii) the presence, activities, acts or omissions (whether negligent, intentional, or otherwise) of Lakeview. This includes, but is not limited to, all actions, claims, demands, suits, liabilities, assertions of liability, losses, costs, judgments, and expenses on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to the participation in Camp, of any member of my Family, however the injury or damage is caused, including but not limited to, the NEGLIGENCE of Lakeview.

I fully understand and acknowledge that certain elements of Camp may be physically hazardous and that by participation in Camp, the members of my Family face the risk of accidental and/or other injury. There risks include, but are not limited to, (i) loss or damage to personal property, (ii) injury or fatality due to and/or related to walking, running, jumping, swimming, handling athletic equipment, horseback riding, zip lining and/or other physical activity, (iii) head, neck, arm, leg and/or back injuries, (iv) exposure to inclement weather, outdoor terrain and all the risks inherent therein, (v) slips and falls, and (vi) any other aspects related to Camp. I have fully investigated the nature of Camp and assume the risks of my Family’s participation in Camp. I agree that my Family’s participation in Camp is entirely voluntary and that no member of my Family is under any obligation to take part in Camp. I am fully aware that any member of my Family may suffer these or other injuries arising out of participation in Camp. However, I voluntarily assume these risks on behalf of my Family so they may participate in Camp.

I also consent to Lakeview’s use of photographs and/or video images of any member of my Family for official Lakeview promotional purposes, including print, internet, social media, video, and other media. While the image of a member of my Family may be captured, I understand that my Family’s name will not be shared. I further understand and acknowledge that I am entitled to withdraw my consent to the use of photographs and/or video images of any member of my Family, by providing a request in writing along with a photo or photos of the members of my Family to Lakeview.

This Agreement is to be governed by and construed under the laws of the State of Indiana. In the event that any term or provision of this Agreement is found to be unenforceable or void, in whole or in part, the term or provision concerned shall be construed as valid and enforceable to the maximum extent permitted by law, and the balance of this Agreement shall remain in full force and effect. I agree that exclusive venue for any dispute arising between Lakeview and me involving this Agreement shall be in Bartholomew County, Indiana.

Parent or Guardian Signature _____ Date _____

Spouse Signature _____ Date _____

Names of Child(ren) _____

Names of other Family members attending Camp _____
