

Authorization / Release Form

In consideration of my participation in the Freedomgate Camp Facilities, I in full recognition and appreciation of the dangers and hazards inherent in participating in such activity, do hereby agree to assume all risks and responsibilities surrounding and pertaining to my participation in the activity; and further, I do for myself and my personal representatives(s), heirs, and assigns, hereby agree to defend, hold harmless, indemnify, release and forever discharge Sheepgate Christian Fellowship, and all its Pastors, Deacons, Elders, staff and Members from and against any and all claims, demands and actions, or causes of action, on account of damage to personal property, personal injury, or death which may result from my participation in said activity which results from causes beyond the control of, and without the fault or negligence of, Sheepgate Christian Fellowship, its Pastors, Deacons, Elders, staff and Members during the period of my participation in the activity.

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Childs Name - Please Print

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Parent or Guardian Name - Please Print

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Parent or Guardian Signature

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Date