

THIS FORM MUST BE COMPLETED FOR EACH PERSON WHO WILL BE
OVER THE AGE OF 18 BY THE START OF CAMP.

Name _____ Email _____

Home Address _____

City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____

Please check here if you are over the age of 18.

THE PERSON LISTED ON THIS FORM WILL BE ATTENDING UNIDIVERSITY YOUTH CAMP AT
MARYVILLE COLLEGE AND IN VENUES IN AND AROUND KNOXVILLE, TENNESSEE

As the individual listed above and on behalf of personal representatives and my heirs, I hereby voluntarily agree to release, waive, forever discharge, hold harmless, defend and indemnify Unidiversity Youth Camp, Maryville College and their agents, officers, boards, volunteers and employees from any and all liability and all claims, actions or losses for bodily injury, property damage, wrongful death, loss of services or otherwise which may arise out of my participation in activities related to Unidiversity Youth Camp., including travel to and from the event.

I hereby grant permission for Unidiversity Youth Camp and Maryville College to publish images of me for the purpose of promoting Unidiversity Youth Camp and Maryville College. I grant this permission freely without reservation.

I understand that there are excursions and recreational opportunities at Unidiversity Youth Camp. I fully understand and acknowledge that outdoor recreational activities have inherent risks.

Signature _____ Printed Name _____ Date _____

Church Name _____