



**MAS** | Muslim  
American  
Society  
NURTURE PEOPLE INSPIRE CHANGE

**This document affects your legal rights. Please read it before signing it.**

I, the below named person being eighteen or older in age, or the legal guardian of the person named below who is under 18, in consideration of the facilities, services, equipment and activities offered by MAS, its owners, partners, successors, assigns, employees, and agents (Releases) I hereby acknowledge, agree, promise and covenant on behalf of myself, my heirs, assigns, personal representatives and estate as follows:

**ACKNOWLEDGMENT OF RISKS:** I UNDERSTAND AND ACKNOWLEDGE that participation in the activities and use of the premises, facilities, equipment and services offered by releases bear certain **known risks and unanticipated risks** which could result in INJURY, DEATH, ILLNESS OR DISEASE, PHYSICAL OR MENTAL, OR DAMAGE to myself, to the minor identified below, or my property. **I understand and acknowledge those risks** may result in personal claims against releases, or claims against me by spectators or other third parties. These risks include but in no way, are limited to the following:

(1) The risks involved in use of the premises, facilities, equipment and services offered by Releases'; (2) the acts, omissions or negligence in any degree of Releases; (3) latent or apparent defects or conditions in equipment, property or the facilities provided by Releases or their agents or employees; (4) my own physical condition, or my own acts or omissions; (5) rescue, first aid, emergency treatment or services rendered or failed to be rendered by Releases, or their agents or employees.

I UNDERSTAND AND ACKNOWLEDGE that the above list is not complete or exhaustive, and that other risks, known or unknown, identified or unidentified, **anticipated or unanticipated** may also result in injury, death, illness, disease, or damage **to myself, the minor identified below, or to my property.**

**TRANSPORTATION RELEASE CLAUSE:** If applicable, I, the undersigned parent/guardian of Participants listed below, acknowledge and agree that my child may be transported to and from the camp by the transportation services arranged by the Muslim American Society (MAS). I understand that MAS, its officers, employees, volunteers, and agents are not liable for any injuries, losses, or damages that may occur during the transportation of my child to and from the camp.

I fully release and discharge MAS, its officers, employees, volunteers, and agents from any and all claims, demands, actions, or causes of action that may arise as a result of my child's participation in the transportation services provided, if applicable. I understand that this release applies even if the injury, loss, or damage is caused in whole or in part by the negligence of MAS or its representatives.

I also acknowledge that I am responsible for ensuring my child adheres to all safety guidelines and instructions provided by the transportation service. I agree to assume full responsibility for my child during the transportation period, if applicable.

**ACCEPTANCE OF RISK AND RESPONSIBILITY:** I VOLUNTARILY AGREE, COVENANT AND PROMISE TO ACCEPT AND ASSUME ALL RESPONSIBILITIES, AND RISK FOR INJURY, DEATH, ILLNESS OR DISEASE OR DAMAGE to myself, the minor identified below, or to my property arising from my use of the premises, facilities, equipment and services offered by releases.

I understand and accept that if whatever items are in my possession prove to be disruptive and a hindrance to the camp program or it's attendees, are to be confiscated until the conclusion of camp.

**RELEASE:** I, FOR MYSELF AND THE MINOR IDENTIFIED BELOW, VOLUNTARILY RELEASE AND FOREVER DISCHARGE AND COVENANT NOT TO SUE Releases and their agents or employees, and all other persons or entities affiliated therewith, from any and all liability, claims, demands, actions or rights or action, which are related to, arise out of, or are in any way connected with my use of the premises, facilities, equipment and services offered by Releases, **including, but specifically not limited to any and all negligence or fault of Releases and their agents or employees, whether involved in an activity or not.** I FURTHER AGREE, PROMISE AND COVENANT, ON BEHALF OF MYSELF AND THE MINOR IDENTIFIED BELOW, TO HOLD HARMLESS AND TO INDEMNIFY Releases and their agents or employees, and all other persons or entities **from all defense costs, including attorney's fees, or from any other costs incurred in connection with claims for bodily injury, wrongful death or property damage brought by me or on my behalf.**

I FURTHER ACKNOWLEDGE that I am in the best position to determine my physical ability or the physical ability of the minor identified below to participate in the activities contemplated in this agreement, and acknowledge that I am in good physical and mental health, and not suffering from any condition, disease or disablement which would or could potentially affect participation in the activity.

Permission is granted for MAS to use these photos/videos on the organization's website, newsletters, presentations, or other MAS related purposes, unless otherwise indicated by checking the box below. I understand pictures and videos will not be sold nor will identifying information regarding the youth be released (names or age).

No, I do not grant permission to be photographed and/or videotaped for MAS purposes.

*My signature below indicates that I have read this entire document, understand it completely, and agree to be legally bound by its terms.*

Please print below

Date: \_\_\_\_\_ Name of parent: \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Child 1: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Child2: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Child3: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Child4: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Child5: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

# **OUTDOOR JOURNEYS PROGRAM WAVIER**



## **PARENTAL/LEGAL GUARDIAN PERMISSION**

I grant permission for my child or if over the age of 18 years accept to participate in all activities and camp programs, included but not limited to ropes course, out-of-camp trips by van, bus, motorized water craft or other designated vehicles, understanding that appropriate supervision is provided under the State of California requirements for residential camp programs. I also understand that during my child's participation at Outdoor Journeys Adventure Center, s/he/I may be exposed to a variety of risks and hazards, foreseen or unforeseen, which cannot be eliminated without fundamentally altering the unique character of the program. Those hazards include, but are not limited to, hiking/walking/running outside; snakes, insects, and large-animals; sunburn and heatstroke, dehydration, hypothermia and other mild or serious conditions or injuries; falling and rolling rock; drowning; lightning and unpredictable forces of nature (including weather that may change to extreme conditions without notice), etc. As a condition of my child's participation in the Program, I acknowledge that participation is entirely voluntary, and I agree to assume full responsibility for the risks that participation may entail. I voluntarily agree to release, indemnify, and hold harmless Outdoor Journeys Inc., its officers, directors, agents and employees, to the fullest extent permitted under the law. I understand that this release covers all liabilities, charges, expenses and costs on account of or by reason of any such injuries, claims, actions, or other legal proceedings however occurring or damages growing out of the same. The authorization shall remain effective throughout the entire camp session(s) the child attends unless sooner revoked in writing delivered to said agent(s). This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California.

Outdoor Journeys is not responsible for lost, stolen or damaged articles. I authorize Outdoor Journeys, to have and use photographs, slides and/or video of my child/myself listed on this form for marketing and/or advertising purposes (only), and I hereby consent to and authorize such use without seeking remuneration.

Outdoor Journeys has strict guidelines on how staff uses their personal social media sites with regard to their employment. Camp attendees who are minors are not permitted to have contact with adult staff outside of camp including social network sites unless they have written permission from their parent or guardian.

**I HAVE READ THIS AGREEMENT. I FULLY UNDERSTAND IT AND AGREE TO BE**

**LEGALLY BOUND BY IT If participant is under the Age of 18 years a parent or**

**guardian signature is required**

**Parent/Guardian Name:** \_\_\_\_\_ **Contact Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_

**Zip:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Participant Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Participant Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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

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

Use reverse of form for any additional participants.

**Outdoor Journeys, Inc**

**4650 Jenks Lake Road East, Angelus Oaks CA 92305 (909) 251-5020**

This institution is an equal opportunity provider in accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.<sup>1</sup>