

Youth Group Retreat Waiver of Liability

Participant Name:

Age:

Parent/Guardian Name:

Retreat Details

Event Name:

Date(s):

Location:

Waiver of Liability

I, the undersigned, hereby acknowledge that participation in the above-mentioned Youth Group Retreat involves certain inherent risks. I voluntarily assume all such risks and agree to release and hold harmless the organizers, sponsors, volunteers, and staff from any liability, claims, or demands for personal injury, illness, property loss or damage, or death incurred by the participant as a result of participation in this event.

I certify that the participant is physically able to participate in the retreat activities. I authorize the organizers to seek emergency medical care for the participant if needed.

Participant Signature (or Parent/Guardian if under 18):

Date:
