

## **ASSUMPTION OF RISK, WAIVER OF LIABILITY AND RELEASE**

### **Northern Lights Council of Boy Scouts of America Camp Wilderness Scout Camp**

Please read the following carefully. There are numerous activities the Scout will be able to participate in while at Camp Wilderness. This Assumption of Risk, Waiver of Liability and Release Agreement ("Agreement") contains important information and releases. If you have any questions about this Agreement, please call the Northern Lights Council Office at 701-293-5011.

**Name of Scout/Volunteer:** \_\_\_\_\_

I am the parent and/or guardian of the Scout ("Scout"), or I am a volunteer Scout Leader ("Volunteer"). This document and all its provisions will apply to the Scout and to the Volunteer, as the case may be. For purposes of this document, the term "Scout" will mean and include the Scout or the Volunteer signing the document.

I understand that, as a Scout at Camp Wilderness Scout Camp operated by Northern Lights Council of Boy Scouts of America (hereinafter, "Camp Wilderness" or "Camp"), the Scout will be involved in activities with the risk of injury or death to the Scout or damage to personal property. Some of the activities which give rise to these risks include, but are not limited to: C.O.P.E. (Challenging Outdoor Personal Experience); shooting sports (rifle/shotgun); BB gun shooting; sling shots; aquatics and waterfront activities, including swimming, canoeing and kayaking; climbing tower; horsemanship; Outpost programs; archery; transportation for offsite programs, which may include golf, scuba and other activities; building and maintaining campfires; and the use of knives, hatchets, axes and saws.

I certify that I am the legal guardian and/or the parent of the Scout who will be participating in Camp Wilderness activities. I certify that I have the authority to sign this document on the minor Scout's behalf. I certify I am signing on behalf of all parents and guardians of the Scout. I acknowledge that I know and understand that all waivers, releases, assumptions of risk and terms of this Agreement will apply to the Scout, and/or to myself if I am a Volunteer.

I certify that the Scout has no physical or mental condition or medical condition that prevents the Scout from participating in Camp Wilderness activities. I will list any activities which the Scout is not permitted to participate in on this document where indicated on page 2.

Being aware of the risks involved, the Scout is allowed to voluntarily participate in Camp Wilderness activities, including but not limited to those previously set forth. I understand that the waivers, releases and assumptions of risk herein contained are in consideration of and part payment for the right to participate in these activities and Camp Wilderness.

**I EXPRESSLY, WILLINGLY AND VOLUNTARILY, ON MY BEHALF (AS A PARENT, GUARDIAN OR VOLUNTEER) AND ON BEHALF OF THE SCOUT, ASSUME FULL RESPONSIBILITY FOR ALL RISKS OF ANY AND EVERY KIND INVOLVED WITH OR ARISING FROM THE SCOUT'S PARTICIPATION IN CAMP ACTIVITIES OF ANY KIND, WHETHER ORGANIZED BY THE SCOUT LEADERS OR BY OTHER SCOUTS.**

**WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I HEREBY IRREVOCABLY RELEASE CAMP WILDERNESS, BOY SCOUTS OF AMERICA, NORTHERN LIGHTS COUNCIL OF BOY SCOUTS OF AMERICA, ITS/THEIR DIRECTORS, OFFICERS, EMPLOYEES, AGENTS, REPRESENTATIVES, CONTRACTORS, SUBCONTRACTORS, VOLUNTEERS, SUCCESSORS, ASSIGNS, AFFILIATES, LEGAL REPRESENTATIVES AND INSURERS (THE "RELEASED PARTIES") AND HOLD THEM HARMLESS, FROM ALL CLAIMS, RIGHTS, DEMANDS, LIABILITY, DAMAGES AND/OR CAUSES OF ACTIONS, WHETHER KNOWN OR UNKNOWN, SUSPECTED OR UNSUSPECTED, ARISING OUT OF**

**CAMP ACTIVITIES (COLLECTIVELY, "CLAIMS"). THIS APPLIES TO ALL CLAIMS WHICH I MAY HAVE OR THE SCOUT HAS OR MAY HAVE, OR ANY SUCCESSOR, HEIR OR ASSIGN I MAY HAVE OR THE SCOUT MAY HAVE, AGAINST THE RELEASED PARTIES IN CONNECTION WITH USE OF CAMP WILDERNESS OR ANY OF ITS ACTIVITIES, AND I AGREE ON MY BEHALF, AND ON BEHALF OF ANY OTHER PARENT OR GUARDIAN OF THE SCOUT, AND ON BEHALF OF THE SCOUT OR AS A VOLUNTEER, TO MAKE NO CLAIMS AGAINST, NOR TO SUE, THE RELEASED PARTIES FOR INJURIES, DEATH OR PROPERTY DAMAGE. I AGREE TO HOLD HARMLESS AND DEFEND THE RELEASED PARTIES FROM AND AGAINST ANY AND ALL CLAIMS, WHETHER KNOWN OR UNKNOWN, SUSPECTED OR UNSUSPECTED, ARISING OUT OF CAMP ACTIVITIES IN ANY WAY AFFECTING THE SCOUT OR THE SCOUT'S FAMILY, OR AFFECTING THE VOLUNTEER.**

**I DO FURTHER WAIVE AND RELEASE ANY CLAIMS THAT MAY BE RELATED IN ANY MANNER TO BEING EXPOSED TO OR BEING AFFECTED BY ANY ILLNESS OR DISEASE, INCLUDING, BUT NOT LIMITED TO COVID-19 OR ANY OTHER ILLNESS AS A RESULT OF ATTENDING CAMP WILDERNESS OR PARTICIPATING IN ANY ACTIVITY RELATING TO CAMP WILDERNESS. I UNDERSTAND THAT CAMP WILDERNESS CANNOT CONTROL OR JUDGE THE HEALTH OF ANY OTHER SCOUTS, VOLUNTEERS OR RELEASED PARTIES WHO MAY CAUSE EXPOSURE OF A SCOUT TO ILLNESS**

This Assumption of Risk, Waiver of Liability and Release is the full, final and entire agreement between the undersigned and the Released Parties regarding the matters herein addressed.

I further agree that if any portion of this Assumption of Risk, Waiver of Liability and Release is held to be invalid, it is agreed that every other part of this Agreement will continue in full force and effect.

**BY SIGNING BELOW, I HEREBY CERTIFY THAT I HAVE READ THIS AGREEMENT, UNDERSTAND IT AND AGREE TO BE BOUND BY IT.**

**Name of Scout/Volunteer (printed):** \_\_\_\_\_

Scout's Date of Birth: \_\_\_\_\_ Troop: \_\_\_\_\_

**IF A MINOR:**

**Name of Parent/Guardian of Scout (printed):** \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_ Phone No: \_\_\_\_\_

Activities the Scout may NOT participate in:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(Signature of Parent/Guardian/Volunteer)