

CAMPER AGREEMENT

In consideration of the outdoor living experience to be provided by Lodestone Adventures, Inc. DBA Flying Bear Zip Lines, its officers, agents, employees, stockholders, and all other persons or entities associated with those Flying Bear Zip Lines and Lodestone Adventures, Inc. (hereinafter collectively referred to as "Flying Bear") I _____ agree as follows:

Although Flying Bear has taken reasonable steps to provide you with appropriate equipment and skilled instructors so you can enjoy an activity for which you may not be skilled, we wish to remind you: this activity is not without risk. Certain risks cannot be eliminated without destroying the unique character of this activity. The same elements that contribute to the unique character of this activity can be causes of loss or damage to your property, accidental injury or illness or in extreme cases, permanent injury trauma or death. We do not want to frighten you or reduce your enthusiasm for this activity, but we do think it is important for you to know in advance what to expect and to be informed of the inherent risks. A Zip Line group activity is not an amusement park ride, campers are actively involved in the process and responsible for their actions and the actions of minors with them. The following describes some, but not all of those risks:

Zip Lines, hiking, and related camp activities which include: the possibility of slips and falls; rope burns, pinches, scrapes, twists and jolts that could result in scratches, bruises, sprains, lacerations, fractures, concussions, or even more severe life threatening injuries. An outdoor environment has inherent hazards such as inclement weather, cold, heat, rain, snow, uneven ground and other hazards. During this organized camp activity there may be contact with plants, animals or insects that could create hazards such as stings, allergies and associated diseases and ailments.

I am aware that this organized group activity entails risks to myself. I understand that the description of these risks is not complete and that other unknown or unanticipated risks may result in injury or death. I agree to assume responsibility for the risks identified herein and those risks not specifically identified. My participation in this activity as a camper is purely voluntary, no one is forcing me to participate, and I elect to participate in spite of these risks. I understand that by executing this Camper Agreement, I am a camper at Cedar Lake and am authorized and entitled to participate in the activities offered by Flying Bear Zip Lines as described in this Agreement.

I certify that I am fully capable of participating in this organized group activity. I have been fully open and honest about any medical conditions that I may have that could affect my participation. Therefore, I assume full responsibility for myself and any and all minor children accompanying me, for bodily injury, death and loss of personal property and expenses thereof as a result of those inherent risks and dangers and of my negligence in participating in this organized group activity. The undersigned further agrees to indemnify and hold harmless Flying Bear Zip Lines, Lodestone Adventures, Inc., and the First Congregational Church of Los Angeles/Cedar Lake Camp, its agents, assigns, officers, directors, employees and any and all other persons associated with and/or acting with or on behalf of the foregoing entities from any and all loss, expense or damages of any kind, including attorney fees, for damage because of bodily injury, death or dismemberment sustained or incurred by the undersigned as a result of organized group activities participated in by the undersigned pursuant to the terms of this agreement.

HEALTH HISTORY

Please describe any health problems that require medication or special restrictions as they apply to the organized group activities that you will participate in:

By signing this form I certify that my immunizations (or the immunizations of minors that accompany me) are current. Please indicate the date of last tetanus shot _____

Please list any allergies: _____

I have read, understood, and accepted the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon me, my heirs, assigns, personal representative, estate and for all members of my family, including any and all minors accompanying me. I acknowledge I am not relying on any oral, written, or visual representations or statements made by Flying Bear including those made in its brochures or other promotional material, to induce me to participate in this activity. I further certify that all information I have given is true and correct to the best of my knowledge.

Print Name: _____

Signature of Camper : _____ Date: _____

PARENT/GUARDIAN AGREEMENT

I agree with the above and I authorize Flying Bear to call for medical care for the above named minor camper or to transport the minor camper to a medical facility or hospital if, in the opinion of such personnel, medical attention is needed by the minor camper. I further authorize appropriate medical personnel to render such medical treatment as is necessary for the health of the minor camper. I agree that once that minor camper is in the care of medical personnel, medical facility or hospital, Flying Bear shall have no further responsibility for the minor camper and I agree to pay all costs associated with such medical care and transportation incurred by Flying Bear.

If under 18 years of age,

Signature of parent or guardian: _____ **Print name:** _____