



## **KID'S OUTDOOR ZONE AT PONDEROSA BIBLE CHURCH PARTICIPATING RELEASE:**

Parents voluntarily register their children for participation in **KID'S OUTDOOR ZONE (KOZ) AT PONDEROSA BIBLE CHURCH**, outdoor training events, camping, fishing, and classes. Parents are required to complete and sign the medical release, liability release and registration form for each child participating. Children will not be accepted into the program without completed and signed forms.

**EVENT REGISTERING FOR ALL KOZ ACTIVITIES THAT MY SON ATTENDS** \_\_\_\_\_

Child's Name: \_\_\_\_\_  
(last name, first name, middle initial)

Parents Names: \_\_\_\_\_

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

EMAIL: \_\_\_\_\_

Home Phone: \_\_\_\_\_ CELL: \_\_\_\_\_

Work: \_\_\_\_\_

**EMERGENCY CONTACT** persons to contact if we can't reach parent or guardian name above:  
Contact Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

CELL: \_\_\_\_\_

For More Information, Call: **KOZ Director Darrin Boyd 602-292-3119**

**Release of Liability and Acknowledgment and Acceptance of Dangers, Risks and Hazards of Camping, Fishing, Hiking and all related activities for KOZ**

By signing this agreement, I hereby acknowledge that I have knowingly and willingly entered an outdoor class, or become a party bound by the terms and conditions of a hunting or fishing camp or outing by and between (student) \_\_\_\_\_, et al. (hunter, fisher, camper, student hereinafter the student, whether one or more) and **KOZ at Ponderosa Bible Church**, et al. (landowner/lease/manager/instructor /owner/guide/leader, hereinafter the Instructor, whether one or more) dated \_\_\_\_\_, 2022.

I further acknowledge and understand that no warranty, either express or implied, is made by the student as to the condition of the property (hereinafter the property premises) located in Gila County, Arizona, or of any roads, buildings, gates, or other improvements located thereon. This document serves to warn me that dangerous conditions, risks, and hazards do exist. My presence and activities on the property premises expose both me and my property to dangerous conditions, risks and hazards, including but not limited to: poisonous snakes, insects and spiders; blinds and tree stands, whether or not erected by Instructor; erosion and general condition of the land, both on and off roadways or Sendero's, creating rough, hazardous and dangerous driving and walking conditions; animals both wild and domestic that may be diseased and/or potentially dangerous; deep water; persons with firearms both on or off the property premises; and the use of vehicles. I hereby state that I expressly assume as well as allow my child to assume all such dangers, risks, and hazards.

Allow any images, photos, video images, audio recording from these events to be used for promoting advertising or any other purpose deemed necessary to promote or enhance the organizations listed above and their audience or groups or potential groups or audiences.

I hereby further understand and agree to abide by all the rules, provisions and terms of this agreement as set forth by the instructor, if any (see attached). It is understood that the student will be in breach of this agreement if the student fails to follow those rules and terms as set forth in the attachment. I further agree to abide by all state game laws as set forth by the Arizona Parks & Wildlife Department. In addition to state game laws, Student agrees to abide by all local, state, and federal laws while on the land premises. As the Student/Parent/Guest/Instructor, I understand that failing to do so may void this agreement, and the agreement may then be cancelled at the sole discretion of the Manager. In that unlikely event, I further agree to forfeit all present and future claims regarding the remaining term of the original agreement.

As used in this release, the terms I, my person and myself include minors in my care while on the leased premises.

Date and signed this \_\_\_\_ day of \_\_\_\_\_, 2022.

Parent/Guardian \_\_\_\_\_

**Medical Release Form**

Parents voluntarily register their children for participation in **Kid's Outdoor Zone at Ponderosa Bible Church**. Parents are required to complete and sign the medical release form for each child registered to participate. Children will not be accepted into the program without this completed and signed form.

Child's Name: \_\_\_\_\_

Person to contact in Emergency:  
\_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX \_\_\_\_\_

Other person to contact if we can't reach name above:  
\_\_\_\_\_

(Name)  
Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX \_\_\_\_\_  
\_\_\_\_\_

**Medical File Information:**

Your family physician or medical office: \_\_\_\_\_

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

\_ Phone number: \_\_\_\_\_

\_\_\_\_\_ **\*\*Does your child have health problems we need to be prepared for?**

Is your child on medication: (circle one) Yes No

If yes, please list all medications:  
\_\_\_\_\_

Medical Insurance Coverage? (circle one) Yes No

Company Name: \_\_\_\_\_

Policy number: \_\_\_\_\_ Phone number: \_\_\_\_\_

I hereby release **Ponderosa Bible Church** and KOZ camp staff from responsibility in case of illness, accident, or injury. I further give permission to any physician, hospital, or other medical facility to provide treatment to my child in the event of a medical emergency.

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_



## **PHOTO RELEASE FORM FOR MINORS**

PONDEROSA BIBLE CHURCH has my permission to take and use my boy's photos from Kids Outdoor Zone (KOZ) activities. On occasion, a group or individual photo may be posted on the church website or social media page, but a boy will never be identified by name.

PARENT/GUARDIAN NAME \_\_\_\_\_

Child's name \_\_\_\_\_

Birthdate \_\_\_\_\_

Primary phone number \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_