**Won Buddhism Meditation Temple – Chapel Hill, NC**

**Children’s Camp Liability Waiver Form**

**Voluntary Participation**

I acknowledge that I have voluntarily applied to participate in the Won Buddhism Meditation Temple’s Children’s Camp, to be held at 8021 Old NC 86, Chapel Hill NC 27516, from June 24th through June 28thor July 8th-July 12th 2019, referred to below as “Camp.”

**Assumption of Risk**

I am fully aware that participating in the Children’s Camp will involve physical activities, such as: meditation, yoga, tai-chi, gardening, walking, playing outdoors, and other movement and activities, all of which have associated risks, both known, unknown, and unanticipated. I also am aware that Camp participants may experience intense psychological, spiritual, or physical states of mind associated from Camp activities. I am voluntarily participating in these activities with full knowledge that participation at Camp can expose me to dangers from these known and unknown risks, and I assume all risks and hazards incidental to Camp participation.

**Release**

As consideration for the Won Buddhism Meditation Temple in Chapel Hill allowing me to participate in these activities and use their facilities, I agree that neither, I, nor anyone acting on my behalf, will make a claim against, sue, or otherwise find fault with the property of the Won Buddhism Temple in Chapel Hill; or with its employees, officers, volunteers, members, representatives, agents, sponsors, promoters, or affiliates and affiliated organizations (collectively “releasees”); for injury or damage resulting from acts or conditions, howsoever caused, as a result of my presence at or participation in the Children’s Camp. I discharge, release, indemnify, and hold harmless the Won Buddhism Meditation Temple and its releasees from every claim and any liability that may be alleged as a direct or indirect result of injury, damage, loss, or death that may incur from my presence at or participation in Camp or Camp-related activities, planned or unplanned.

**Knowing and Voluntary Execution of this Agreement**

I have carefully read this agreement and fully understand its contents. I am aware that by signing this release of liability, I am giving up substantial legal rights and am executing a legal and binding contract between myself and the Won Buddhism Meditation Temple in Chapel Hill, North Carolina, and its affiliated organizations. I sign it of my own free will.

Printed Name of Camper: : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent or Guardian: Relationship to Camper: :\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Consent for Emergency Medical Care**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby permit the camp staff to seek emergency medical assistance for my child (children) and provide basic medical care, in such cases as deemed necessary by the staff.

Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

**Consent for Photography and Video**

Thank you for joining the dharma camp at the *Won*-Buddhism Meditation Temple. With your permission, we would like to photograph or video camp activities that may include your child. These materials will be used for reflection and presentation at the last day of the camp and may be used in our temple website to promote future children/teen programs. Thank you for your support.

Parent Signature\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_

If you are not on our mailing list, would you like to receive e-mails to be updated on Temple programs and the children camp? Yes\_\_\_\_\_\_\_ / No\_\_\_\_\_\_\_