

**WAIVER OF LIABILITY, PROMISE NOT TO SUE, ASSUMPTION OF RISK AND
AGREEMENT TO PAY CLAIMS**

Activity: A 1-night tent camping experience at Queen Valley Campground including bus transport to and hike to the Ryan Ranch Ruins in Joshua Tree National Park.

Activity Date and Time (check one):

- Saturday, March 8, 2025 1:00 pm to 9 am Sunday morning (approximately)
- Saturday, March 15, 2025 1:00 pm to 9 am Sunday morning (approximately)
- Saturday, April 5, 2025 1:00 pm to 9 am Sunday morning (approximately)
- Saturday, April 12, 2025 1:00 pm to 9 am Sunday morning (approximately)
- Saturday, April 19, 2025 1:00 pm to 9 am Sunday morning (approximately)
- Saturday, April 26, 2025 1:00 pm to 9 am Sunday morning (approximately)

Activity Location(s):

Queen Valley Campground & Ryan Ranch Ruins, Joshua Tree National Park

As the parent/legal guardian of _____ (*child/camper*),
I, _____ (*parent/legal guardian*) voluntarily give permission for said child/camper to participate in the above referenced Activity on the date/time referenced above. In consideration for being allowed to participate in the above-referenced Activity, on behalf of myself and my next of kin, heirs, representatives, and assigns, I, _____ hereby **release, waive, and discharge from all liability and promise not to sue** Joshua Tree Residential Education Experience, Joshua Tree National Park, Morongo Unified School District (or its affiliated schools), and their employees, officers, directors, volunteers and agents (collectively the "Agencies") from any and all liabilities or claims, **including claims of the Agency's negligence**, resulting in any physical or psychological injury (including paralysis and death), illness, damages, property loss, or economic or emotional loss my child/camper (named: _____) or I may suffer because of our participation in the Activity, including travel to, from and during the Activities.

My child/camper, _____, and I (if I elect to attend) is/are voluntarily participating in this Activity. I am aware of the risks associated with traveling to/from and participating in this Activity, which include but are not limited to physical or psychological injury, pain, suffering, illness, disfigurement, temporary or permanent disability (including paralysis), economic or emotional loss, and/or death. I understand that these injuries or outcomes may arise from my own or other's actions, inaction, or negligence; conditions related to travel; or the condition of the Activity location(s).

Nonetheless, I assume all related risks, both known or unknown to me, of my/my child/camper's participation in the Activity, including any associated use of Queen Valley Campground and Ryan Ranch Ruins in Joshua Tree National Park and any travel to, from and/or during the Activity.

I agree to **indemnify and hold** the Agencies **harmless** from any and all claims, actions, suits, costs, expenses, and liabilities for any injuries to myself and for any damage to my property or possessions that

arise out of or arise from my participation in the Activity, including any injury or damage that occurs during the use of Queen Valley Campground and Ryan Ranch Ruins in Joshua Tree National premises and any travel to, from and/or during the Activity. If the Agencies incur any of these types of expenses, I agree to reimburse the Agencies. If I need medical treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

I am 18 years or older. **I understand the legal consequences of signing this document, including (a) releasing the Agency from all liability, (b) promising not to sue the Agencies, (c) and assuming all risks of participating in the Activity, including travel to, from and during the Activity.**

I understand that this document is written to be as broad and inclusive as legally permitted by the State of California. I agree that if any portion is held invalid or unenforceable, I will continue to be bound by the remaining terms.

I have read this document in its entirety, fully understand its terms, and acknowledge that I am signing it freely and voluntarily. No other representations concerning the legal effect of this document have been made to me.

PHOTOGRAPHY PERMISSIONS

I give permission to JTREE to take photos of my child/camper and me during referenced Activity, and to give JTREE permission to use such photos for marketing purposes that support youth outdoor education?

YES NO

Child/Camper under 18 years old:

I, the parent/legal guardian of the Child/Camper identified and legally responsible for Child/Camper named below hereby agree to all the above on behalf of the Child/Camper.

Child/Camper Name: _____

Parent/Guardian Signature: _____

Parent/Guardian Name (print): _____ Date: _____

Adult Participant (parent or legal guardian of the child/camper listed below):

I, the Participant, am over 18 years old and will be attending the above noted 1-night tent camping experience on the date specified. LEAVE BLANK IF CHILD/CAMPER ATTENDS WITHOUT PARENT

Adult Participant Signature: _____

Adult Participant Name (print): _____ Date: _____

CONSENT FORM TO PARTICIPATE - JTREE "Let's Go Camping"

Full Name of Camper: _____ Email: _____

Camper's Birthdate: ____ / ____ / _____

Street Address: _____ State: _____ Zip Code: _____

Medical Information

Does your child/camper have special instructions for medical treatment? If yes, please explain including the medication your child/camper is

taking: _____

Are there any activities that you wish your child/camper to not participate in? Please explain below:

Does your child/camper have or had Asthma, Kidney Disease, Diabetes, Heart Murmur, Seizures, Hay Fever? Please explain below:

Full Name of Doctor: _____ Phone Number: _____

Consent and Authorization

(to authorize, please initial on the line next to each statement)

I, the undersigned, hereby declare and affirm that:

_____ I am the parent/legal guardian of the child/camper named above (hereinafter referred to as "Child"), who is under my care and responsibility.

_____ I hereby consent and give authority to the participation of my Child/Camper in the scheduled youth activities of Joshua Tree Residential Education Experience’s “Let’s Go Camping” program, and all other activities which are supervised and customarily associated with its youth groups.

_____ I hereby declare and affirm that my Child/Camper is physically fit to take part in the “Let’s Go Camping” activities and my Child/Camper has no known illness or adverse medical condition that would render him/her unfit to participate therein, other than the information specified in the medical information above.

_____ I shall immediately advise the organizers in writing, should I discover any illness, adverse medical condition, or any other physical defect that would render my Child/Camper unfit to participate in the recreational and sporting activities of “Let’s Go Camping”.

_____ I shall notify the organizers immediately in case I revoke my consent to Joshua Tree Residential Education Experience for “Let’s Go Camping”.

Authorization for Medical Treatment

(to authorize, please initial on the line next to each statement)

_____ I understand that in case of medical emergencies involving my Child/Camper, I shall be notified right away at the emergency phone number provided. In case any of my provided contact information is unreachable, I authorize the organization to call the doctor indicated above. In case that the doctor is not available, I authorize the organizers to call any doctor to provide the necessary medical attention to my child/camper.

_____ I understand that Joshua Tree Residential Education Experience shall not be responsible or liable for administration of medications for my Child/Camper.

_____ I understand that Joshua Tree Residential Education Experience shall not be responsible, and shall be reimbursed, for any medical expenses incurred by them over this authorization.

Name of Parent/Guardian (PRINT): _____
FIRST NAME LAST NAME

Contact Phone Number: _____

Signature of Parent/Guardian: _____

PARTICIPANT (CHILD) RELEASE/PICK-UP AUTHORIZATION
JTREE “Let’s Go Camping”

I understand that my child will not be permitted to leave with anyone other than the person(s) I have listed below. I give permission for the following person(s) to pick-up my child from the JTREE “Let’s Go Camping” Experience on Sunday, _____, 2025 at 9:00 am:

Child/Camper’s Name: _____

Authorized Person(s) for Release/Pick-up: _____

Relationship to Child/Camper: _____

Signature of Parent/Guardian: _____

CHILD/CAMPER RELEASE

_____ (Child/Camper) was pick-up/released to _____

on _____, 2025 at _____ (time) by _____.

JTREE Staff Signature: _____ Printed Name: _____

I acknowledge pick-up/release of at this child/camper at the stated time:

Authorized person’s signature: _____ Date: _____ Time: _____

Authorized person’s DL #: _____