

**STAPLE ALL FORMS HERE**  
Download forms at [www.thewsm.com](http://www.thewsm.com)



## WHO

Any and all high and middle school students (and their friends) who want to have a weekend they will never forget. This is a combined middle school/high school event – but don't worry: all programs and activities are middle school/high school separate except meals and general sessions.

## WHAT

All kinds of activities: 3 on 3 Basketball tournament, killer tubing hill, indoor game room with pool, ping pong, etc., volleyball, climbing wall, and custom outdoor broomball court.

## DETAILS



Besides all of the recreational shenanigans listed above, we will have worship led by Eric Fritts and the Lighthouse band. Our speaker this year is Ken Rudolph – quite possibly one of the most passionate and creative speakers you have ever heard (no offense to campus pastors, student pastors, or Woodside teaching team members implied). He will challenge us all around the theme of 'MOVE'. Other activities include lip sync (high school only) and late-night field games (middle school).

Make sure to bring a Bible, notebook, snow-friendly clothes, toiletry items, camera, and a bag dinner for the bus ride Friday night. You do not need to bring sleeping bags or pillows – all bedding is provided! You will also want to leave ipods, music players, etc at home – they may get lost and they will distract you from why you are here!

## WHERE

Timber Wolf Lake is a Young Life camp in Cadillac, MI that WSM has reserved just for our group (capacity 400) for this weekend of sweetness! Cabins consist of 10-12 students and 2 trained WSM student ministry staff per room. We will leave the Troy Campus Friday @ 3:30 PM and return by 6 PM Sunday afternoon (other campuses may have slightly different plans).

## PARENTS

Name/ Gender/ Grade/  
Room Request/  
Campus /  
I want the  DVD (\$10)  T-Shirt (\$10) Size/

I've included:  Payment (Full Amount)  
 Consent Release Form  
 Release of Liability Form

Download Forms at [www.thewsm.com](http://www.thewsm.com)





GUEST CONSENT RELEASE FORM FOR OUTSIDE GROUPS USING YOUNG LIFE CAMP

NOTE TO GUEST: Young Life wants your experience at the Young Life camps to be a safe and healthy one. However, in the event of an accident or illness, it is important that we have the following information.

Name Last First Middle Initial

Birthdate Age Sex

Spouse/First Emergency Contact Last First Middle Initial

Home Address Street and Number City State/Province Zip/Postal

Business Address Street and Number City State/Province Zip/Postal

Phone Number Home Business

Second Emergency Contact Last First Middle Initial

Home Address Street and Number City State/Province Zip/Postal

Business Address Street and Number City State/Province Zip/Postal

Phone Number Home Business

Any allergies or other medical needs?

Name of Physician Last First Middle Initial Phone Number

Address Street and Number City State/Province Zip/Postal

I have had a physical within the last 24 months.

Medical Insurance Company Policy Number

Address Street and Number City State/Province Zip/Postal

INDEMNITY AND CONTRACT AGREEMENT: I will not hold or attempt to hold Young Life liable for any loss, damage or injury to person or property caused by any act or neglect of other persons on or about the Property, or caused in any manner other than the willful or negligent act of Young Life, its agents and employees, and will indemnify and hold Young Life harmless from any liability for damages or claims against Young Life arising out of or in any way related to any such loss, damage or injury.

I release Young Life, including its trustees, employees and agents, from my physical injury, including death, or illness while at the Property. I will assume the risk associated therewith, whether known or unknown to me at this time. This release is also intended to include all claims of my family, estate, heirs, personal representatives or assigns.

Authorization for Treatment: I hereby give permission to the medical personnel selected by the camp director to secure and administer treatment and to maintain and/or release any medical records necessary for insurance purposes as outlined under the HIPAA regulation, and to provide or arrange necessary related transportation for the above named person. To obtain a copy of Young Life's Notice of Privacy Practices, log on to www.younglife.org or call (719) 381-1950.

I verify that I am in good health and am capable of participating in strenuous activities, and when necessary, will tailor my activities to those within the bounds of my physical health. In Colorado, campers will participate in rigorous activities at 9,000 to 14,000 feet. I recognize that any medical treatment that is provided to me while attending a Young Life camp will be paid for by my medical insurance company.

WAIVER AND RELEASE IF I AM UNDER AGE 18, MY PARENT OR GUARDIAN, BY SIGNING BELOW, ALSO CONSENTS TO MY RELEASE AND HE OR SHE AGREES THAT THIS RELEASE SHALL BE BINDING UPON HIM OR HER AS MY PARENT OR GUARDIAN AS TO ME AND MY ESTATE, HEIRS, PERSONAL REPRESENTATIVES AND ASSIGNS. MY PARENT OR GUARDIAN ALSO PROMISES, BY SIGNING BELOW TO DEFEND, INDEMNIFY AND HOLD YOUNG LIFE HARMLESS FROM ANY CLAIM ASSERTED BY ME AGAINST YOUNG LIFE, INCLUDING ITS TRUSTEES, EMPLOYEES AND AGENTS, IF I SHOULD REPUDIATE THIS RELEASE AFTER OBTAINING ADULTHOOD.

Signature Date

Name of Your Group/Church Dates of Event



**younglife.**

**TIMBER WOLF LAKE**

**SNOW TUBER/ICE RINK AGREEMENT AND RELEASE OF LIABILITY**

**IMPORTANT: THIS DOCUMENT CONTAINS A RELEASE OF LIABILITY. YOU ARE ADVISED TO REVIEW THIS AND THE INFO SHEET CAREFULLY.**

I understand and agree that snow tubing and ice rink activities can be hazardous and recognize and acknowledge the following risks inherent to the sport:

**Warning:** Under Michigan law, a snow tuber/ice rink participant assumes the risk of any injury to person or property resulting from any of the inherent dangers and risks of such activities and may not recover from any snow tube/ice rink area operator for any injury resulting from any of the inherent dangers and risks including: changing weather conditions; existing and changing snow conditions; bare spots, rocks, stumps, trees, collisions with natural objects, manmade objects or other participants; variations in terrain; and the failure of participants to recognize the limit of their abilities.

Being fully aware of the risks, conditions and hazards of snow tubing and ice rink skating/games, Participant hereby agrees to waive, release, and discharge any and all claims for death, personal injury or property damage in consideration of using the Timber Wolf Lake premises. Participant agrees to assume all risks associated with said activities and hold harmless Timber Wolf Lake and Young Life and its representatives for all liabilities or claims for injury to person or property arising from the negligence or breach of warranty, expressed or implied.

In exchange for, and in consideration of, Timber Wolf Lake making the snow tubing area/ice rink facility and premises available to me and/or my minor child(ren) for participation, PARTICIPANT CONTRACTUALLY AGREES THAT ALL DISPUTES between myself and Timber Wolf Lake arising from my participation and INCLUDING any claims for personal injury and/or death, will be GOVERNED BY THE LAWS OF THE STATE OF MICHIGAN and EXCLUSIVE JURISDICTION thereof will be in the state court residing in the county where the alleged tort occurred or federal courts of the State of Michigan. This release shall be binding to the fullest extent permitted by law. In the event any section of the Release is found to be unenforceable, the remaining terms shall be enforceable.

I acknowledge that my physical and mental condition and that of my minor child(ren), if any, participating in snow tubing/ice rink activities associated with Timber Wolf Lake, are adequate to enable me and/or such child(ren) to handle safely the ordinary and inherent risks that are involved in participating in said activities or programs at or through Timber Wolf. I further agree that the waiver and release I have given by signing this document is given on behalf of myself and my minor child(ren) identified below and the heirs, family and estate executors, administrators, assigns and personal representatives, or me and any such minor child(ren).

_____	_____	_____
Signature of Parent or Guardian	Print Name	Date
_____		_____
Print names of minor child(ren)		Relationship to minor child(ren)

**PHOTOGRAPH AND/OR TESTIMONIAL AUTHORIZATION**

I hereby authorize Timber Wolf and their agents to use, sell, publish, reproduce, modify, televise, alter, combine with others, and otherwise treat or deal with any and all photographs and motion pictures taken of me and my dependents. I convey to Timber Wolf Lake and their assigns, all property rights and privilege in connection with said photographs and motion pictures.

_____	_____
Signature	Date