



Registration Form

Trip Program Name _____ Trip Program Date _____

The organizers of Canoe Creation require this registration form to be completed and signed by all attendees, both for adults and children. Minors must have a parent or guardian signature. No participant will be permitted to attend without a completed and signed form. *Please use a separate registration form for each participant.*

Participant Name: _____ Participant Age: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Swimmer: (circle one) yes no

Life Jacket Size: (circle one) Child (30-50lbs) Adult small (50-90lbs) Adult large Adult extra large

In case of an emergency, notify:

#1 Name _____ Relation to Participant _____ Phone _____

#2 Name _____ Relation to Participant _____ Phone _____

Please list any medical conditions, activity restrictions, allergies, or food restrictions, along with any specific parameters for medical treatment so that we may ensure the safety and well-being of participant.

Optional: Family Physician _____ Phone _____

Optional: Medical Insurance ID _____ Insurance Company _____ Group Number _____

Release of Liability & Participant Agreement: I acknowledge that certain hazards and dangers are inherent in outdoor activities and programs. I hereby release Canoe Creation, the owners of the properties on which activities are conducted and the chaperones or organizers of the Canoe Creation outing from any claims for personal injury or property damage arising from the participation in this Canoe Creation outing. The participant herein described has permission to engage in all outing activities except those noted by guardian or parent on the reverse side of this form. I understand that an injury sustained by the participant while participating in Canoe Creation outings will not be covered by insurance provided by the organizers, Canoe Creation or the owners of the locations on which they visit in the course of the outing. This agreement is made in Christian trust and in good faith that the organizers, chaperones, and members of Canoe Creation ministry team will take all precautions in safety. I am also trusting that Canoe Creation will respect the wishes of the parents or guardians of the participants, and will put the well-being of all of the participants as the highest priority. I will also permit use of photographs of participant for promotional purposes.

Signature of Parent/Guardian or Adult Participant _____ Date _____

I, the Participant, understand and agree to abide by any restrictions placed on my participation in Canoe Creation activities and agree to abide by rules set out by the organizers of the Canoe Creation outing.

Signature of Child Participant _____ Date _____

Please mail completed form and payment to Canoe Creation, 6400 Cutler Lake Rd. Blue Rock, OH 43720 or scan and email to amy@canoecreation.org (online payment can be made on website through PayPal).