

**YMCA of Greater New York**  
**New York YMCA Camp –Greenkill Outdoor Education Center**

**Parental Agreement, Release, and Acknowledgement of Risk**

In consideration of the Outdoor Education services provided by the New York YMCA Camp , their agent, owners, officers, employees, and all other persons or entities acting in any capacity on their behalf, I hereby agree to release and discharge the Y, on behalf of myself, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I understand and acknowledge that the program, New York YMCA Camp, Greenkill Outdoor Education Center that I am entering my child into poses both known risks and unanticipated risks which include, but are not limited to, the points below.
2. This program entails certain risks which simply cannot be eliminated without jeopardizing the essential qualities of the activity. In addition to educational activities, my child may engage in physical activities including, but not limited to, outdoor activities, team building, wall climbing, hiking, sports and other athletic or recreational activities. Without a certain degree of risk, students would not improve their skills, and the enjoyment of the activity would be diminished.
3. The program exposes its participants to the usual risk of cuts and bruises. Other more serious risks exist as well. Participants can fall off equipment and suffer bodily injuries. Athletic and outdoor activities are inherently dangerous and I acknowledge this risk of injury.
4. I expressly agree and promise to accept and assume all of the risks existing in this activity with regard to my child. My child's participation in this activity is purely voluntary, no one is forcing him/her to participate, and I elect to have him/her participate.
5. I hereby voluntarily release, forever discharge, and agree to hold harmless and indemnify the Y from any and all liability, claims, demands, actions or rights of action, which are related to, arise out of, or are in any way connected with my child's participation in this activity.
6. Should the New York YMCA Camp, or anyone acting on their behalf, be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and reimburse them for such fees and costs.

*My signature below indicates that I have had sufficient opportunity to read this entire document, that I have read it, and that I understand it affects my legal rights; I agree to be bound by its terms.*

\_\_\_\_\_  
Name of Participant

\_\_\_\_\_  
Program Name

\_\_\_\_\_  
Signature of Participant/Guardian (if under 18, signature of parent or guardian)

\_\_\_\_\_  
Name of Parent/Guardian (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email Address