

**PARENTAL INFORMED CONSENT and
RELEASE/INDEMNITY/HOLD-HARMLESS AGREEMENT**

(REQUIRED for ALL under 18 participants)

I understand participation in the Camp Oljato Program activities offered through the Pacific Skyline Council, BSA, at Camp Oljato involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived and after carefully considering the risk involved, and in view of the fact that the Boy Scouts of America is an organization in which membership is voluntary, and having full confidence that precautions will be taken to ensure the safety and well-being of my (son/daughter), I have given _____ (son/daughter) my consent to participate in the Camp Oljato Program activity, and:

RELEASE and INDEMNIFICATION

I hereby release and waive any and all claims that I may have against Boy Scouts of America Pacific Skyline Council, BSA and their employees, agents, representatives, or volunteers arising from my child's participation in Camp Oljato Program. I AGREE TO FULLY INDEMNIFY AND HOLD HARMLESS BOY SCOUTS OF AMERICA PACIFIC SKYLINE COUNCIL, BSA, AND THEIR EMPLOYEES, AGENTS, REPRESENTATIVES, AND VOLUNTEERS FROM ANY AND ALL CLAIMS ARISING FROM MY CHILD'S PARTICIPATION IN Camp Oljato Program. THIS INDEMNIFICATION EXPRESSLY INCLUDES ANY CLAIMS ARISING OUT OF THE BOY SCOUTS OF AMERICA PACIFIC SKYLINE COUNCIL, BSA'S OWN NEGLIGENCE OR FAULT OR THAT OF THEIR EMPLOYEES, AGENTS, REPRESENTATIVES, OR VOLUNTEERS. I AGREE THAT THE INDEMNIFICATION INCLUDES THE AMOUNT OF THE CLAIMS, THE EXPENSES OF DEFENDING AGAINST THE CLAIMS, COURT COSTS, AND ATTORNEYS' FEES.

In case of emergency, I understand that every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for my child.

This form **must** be signed by both parents/guardians.

Signature

Signature

Telephone Number

Telephone Number

Date

Date

AUTHORIZATION and CONSENT TO MINOR
Pursuant of California Civil Code Section 25.8
Pursuant to California Penal Code Sections 12078, 12101 and 12552

ACTIVITY RELEASE FORM
(REQUIRED for ALL under 18 Participants)

Name of Minor: _____ Unit# _____

1. The undersigned, parent or guardian of the minor listed above, gives express permission for the *Archery Range* Staff of the Pacific Skyline Council, Boy Scouts of America, to furnish a bow and arrows to the above minor for engaging in lawful, recreational archery shooting sports including instruction in the safe handling and shooting of bows and arrows, target and competition shooting and related activities.
2. The undersigned, parent or guardian of the minor listed above, gives express permission for the *Rifle Range* Staff of the Pacific Skyline Council, Boy Scouts of America, to furnish a rifle, shotgun, or BB device (including BB, rifle or pellet rifle), and live ammunition to the above minor for engaging in lawful, recreational shooting sports including instruction in the safe handling and shooting of firearms, target and competition shooting, and relate activities.
3. The undersigned, parent or guardian of the minor listed above, gives express permission for the *C.O.P.E. or Climbing* Staff of the Pacific Skyline Council, Boy Scouts of America, to furnish Climbing Equipment for the purpose of instruction and activity in the Project C.O.P.E. or Climbing Program.
4. The undersigned, parent or guardian of the minor listed above, gives express permission for the Rifle Range Staff of the Pacific Skyline Council, Boy Scouts of America, to furnish a BB device (BB rifle) to the above minor for engaging in lawful, recreational shooting sports including instruction in the safe handling and shooting of firearms, target and competition shooting, and related activities.

SIGN for all the activities listed above:

Parent or Guardian Signature: _____

Witness Signature: _____