COVID Waiver of Rights

COVID Waiver of Rights is required to be signed by all visitors, staff, volunteers, and those serving as support staff for Intermountain District sponsored camps. These forms can be completed and brought to camp with you and given to the Camp Manager, office personnel, or the Camp Director in charge of the camp your will be working.

I am a camper, a parent of a camper, a staff member or employee, a party sponsoring a camp, or a visitor to the campus of Trinity Pines campground located in Cascade, Idaho. I acknowledge that I have full knowledge of the COVID-19 virus, and the risks associated with it. I acknowledge that Trinity Pines has taken all reasonable steps to prevent the virus, or the spread of the virus, at the Trinity Pines campground. Despite the COVID-19 virus, I wish to comply with all provisions in this document, and any additional documents or directions issued by Trinity Pines, and I am willing to assume any risk of the COVID-19 virus as to the Trinity Pines campground. I acknowledge that Trinity Pines cannot guarantee my health and safety under these circumstances.

I release Trinity Pines, the Intermountain District Church of the Nazarene, Inc., and any of their agents or employees or independent contractors from any claims or liabilities of any kind or nature, arising from or related to the COVID-19 virus. In the event I make any claim made based upon the COVID-19 virus, I agree that my damages shall be limited to the funds (if any) that I paid to Trinity Pines to attend a camp there.

I affirm that, to my best knowledge, neither I nor a camper that I sponsor has the COVID-19 virus.

This document shall be effective until termina	ted in writing by me.
Dated this day of	_, 2021.
Printed Name	Signature
Name of camper or camp, if applicable	
Status (parent of a camper, staff member or emplo	ovee, sponsor of a camp, or a visitor)