

# TANGLEWOOD WAIVER AND RELEASE OF LIABILITY

Participant Name \_\_\_\_\_ Participant Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

I, the above listed Participant, desire to come voluntarily to Camp Escape, Inc. d/b/a Camp Tanglewood and Tanglewood Plantation LLC d/b/a Tanglewood Retreat (collectively, "Tanglewood") located at 1403 Tanglewood Road, Lawrence, MS 39336, and to engage in the activities related to being a Participant. I hereby freely, voluntarily, and without duress execute this Waiver and Release of Liability under the following terms:

I, the Participant, release and forever discharge and hold harmless Tanglewood, their directors, officers, employees, affiliates and agents, and their successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity, which arise or may hereafter arise from the Participant's Activities with Tanglewood.

I understand that this Waiver discharges Tanglewood from any liability or claim that I, the Participant, may have against Tanglewood with respect to bodily injury, personal injury, illness, death, or property damage that may result from or during my activities on Tanglewood's event site. I also fully understand that Tanglewood does not assume any responsibility for or obligation to provide financial assistance or other assistance, including but not limited to medical, health or disability insurance, in the event of injury, illness, death or property damage.

I, the Participant, understand that I expressly waive any such claim for compensation or liability on the part of Tanglewood in the event of such injury or medical expense. I hereby release Tanglewood from any claim whatsoever which arises or may arise in the future on account of any first aid, medical treatment, or other service rendered in connection with my activities with Tanglewood.

I understand that my activities with Tanglewood may include various activities that may be hazardous to me, and I hereby expressly and specifically assume the risk of injury or harm in these activities and release Tanglewood from all liability for injury, illness, death, or property damage resulting during my activities with Tanglewood.

I acknowledge and understand the following:

- Participation includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist;
- I knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID-19, even if arising from the negligence or fault of the Released Parties; and
- I hereby knowingly assume the risk of injury, harm and loss associated with the Activity, including any injury, harm and loss caused by the negligence, fault or conduct of any kind on the part of the Released Parties.

I grant unto Tanglewood all right, title, and interest in any and all photographic images and video or audio recordings that are made by Tanglewood during my activities with Tanglewood, including, but not limited to, any royalties, proceeds, or other benefits that are derived from such photographs or recordings.

I expressly agree that this Waiver and Release of Liability is intended to be as broad and inclusive as permitted by the laws of the State of Mississippi and that this Waiver and Release of Liability shall be governed by and interpreted in accordance with the laws of the State of Mississippi. I agree that in the event that any clause or provision of this Waiver and Release of Liability shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to enforceable.

Print Participant's Name \_\_\_\_\_ Today's Date \_\_\_\_\_

Participant's Signature\* \_\_\_\_\_

\*If the Participant is a minor or subject to legal guardianship, a parent or legal guardian must affirm consent by signing below:  
I agree that the above-named minor has my consent to be a Participant at Tanglewood. I agree to all of the above terms and conditions. I also give my consent for Tanglewood to seek emergency treatment for the minor, if necessary, and I agree to accept financial responsibility for the costs related to such emergency treatment.

Print Parent/Legal Guardian Name \_\_\_\_\_

Participant/Legal Guardian's Signature\* \_\_\_\_\_