

ASPIRE Aviation Summer Camp Waiver & Release of Liability

I hereby give my permission for my camper _____ to participate in the ASPIRE Aviation Summer Camp.
(Camper’s Full Name)

I understand that camp activities could include play and outdoor activities at the Dekalb-Peachtree Airport (2000 Airport Rd, # 227, Chamblee, GA 30341), including but not limited to walking or riding in a bus or a van to notable sites on the aerodrome, playing on the Doc Manget Memorial Aviation Park located on the aerodrome, walking around and climbing inside various aircraft, flying in a Virtual Reality Simulator, and being inside with multiple other people. I also understand that outdoor activities may occur in the hot sun or in the rain. I agree to see that my camper is appropriately attired for camp activities to include outdoor clothes that are easy to move in, comfortable walking shoes (no flip-flops), a light jacket or rain jacket, and an umbrella if there is a chance of rain. The ASPIRE Aviation Summer Camp will provide insect repellent, sunscreen, and hand sanitizer for campers, however, if any specific type or brand is desired, I will provide the desired product for my camper. I give my permission for the ASPIRE Aviation Summer Camp leaders to apply or assist with the application of these products as needed. Additionally, the ASPIRE Aviation Summer Camp will be providing individually packed snacks and bottled water during a mid-day break each day of the camp. If your camper has any dietary restrictions or preferences, please provide an appropriate snack for your camper to have during the break. Each camper and each camper’s guardian are responsible for knowing the dietary restrictions, communicating them to the camp staff, and providing the preferred snack.

In the event of illness, injury, and/or accident, I authorize the camp leaders to act on my behalf. They may approve any and all emergency or non-emergency treatment. In the event of an emergency, I understand that I will be notified of the situation as soon as practicable. I agree to pay any necessary expenses not covered by ASPIRE Aviation Summer Camp’s student accident policy incurred in the medical treatment of my camper, including but not limited to all transportation costs to and from a medical facility, and, if necessary, transportation to my home or medical facility of choice.

I understand that the ASPIRE Aviation Summer Camp may, in its sole discretion, dismiss any camp participant for inappropriate, disrespectful, or dangerous behavior at any time. In this event, I understand that I will not receive a refund of camp fees for unattended days. If my camper breaks or damages any property as a result of their direct or indirect inappropriate behavior, I hereby agree to pay for its repair or replacement.

I understand that the risks associated with camp activities could result in injury and/or death to my camper. I hereby assume these risks and, knowing them, hereby give my camper permission to participate. I understand that the ASPIRE Aviation Summer Camp is not liable for any injuries or other occurrences due to indoor and outdoor camp activities or related risks, and/or the actions or omissions of ASPIRE Aviation Summer Camp counselors, volunteers, employees, teachers, or directors.

In consideration of my application and permitting my camper to participate in this activity, I hereby:

WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the ASPIRE Aviation Summer Camp, its counselors, volunteers, employees, teachers, or directors for my camper’s death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to them including their traveling to and from this activity.

INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the ASPIRE Aviation Summer Camp, its counselors, volunteers, employees, teachers, and directors from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I understand that while participating in this activity, my camper may be photographed. I agree to allow their photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. The ASPIRE Aviation Summer Camp, its counselors, volunteers, employees, teachers, and directors are hereby released from any and all claims, demands, actions, or causes of action on account of any injury to my camper that may occur. This release binds my heirs, executors, administrators, and/or assigns.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, FULLY UNDERSTAND ITS CONTENT, AND AGREE TO ITS TERMS.

Camper’s Printed Name (Please print legibly)

Age

Parent/Guardian Printed Name (Please print legibly)

Parent/Guardian’s Signature

Date

ASPIRE Aviation Summer Camp – Expectations and Our Commitment to Safety

1. Medical
 - a. Please keep your camper home if they are ill (a refund will be provided)

2. Adult Training
 - a. Staff have completed the Darkness to Light "Stewards of Children" training
 - b. Key adult staff have basic medical training

3. General safety rules
 - a. Listen to all AASC adults identified with name tags
 - b. Name tags with the camp logo and camper's name will be worn at all times during the camp (on the last day they will be part of their take home items).
 - c. Two to four adults will be with the campers (15 max) at all times
 - d. On the aerodrome we will walk as a group to cross streets, ramps, or move to other areas
 - e. While outside water will be provided to ensure campers stay hydrated

4. Activities we have planned
 - a. Training on an aviation scenario
 - b. Tours of airport facilities
 - c. Tours of an aviation company's headquarters
 - d. Tours of various aircrafts
 - e. Simulated flight via virtual reality simulators