

# Introduction to Sea Kayaking

AMC Knubble Bay Camp, September 8 - 10, 2023

Before you register, you are required to read the detailed Introduction to Sea Kayaking program description at: <https://amckbc.org/weekend-programs>

- To determine if there is space in the course, please contact registrar Gail Fensom ([gailrond@comcast.net](mailto:gailrond@comcast.net)) Please do this before completing and sending the registration form and payment. Email Gail if you have any questions.
- To reserve your spot for this exciting weekend, please print and complete this registration form.
- The KBC Volunteer Committee would greatly appreciate it if you would please volunteer to assist with meal preparation/clean-up for at least one of the three meals we will be providing and also for cabin clean-up at the end of the weekend.
- After you register for the course, more information will be emailed to you, including the instructions on accessing the on-line learning materials to be completed prior to the program weekend.
- Please be aware that the program will be held rain or shine.
- Please mail your registration form, release and indemnity form, and your check made out **Beal Island/KBC Committee** to the Registrar:

**No refunds can be made after August 25.**

Gail Fensom  
#7 67th Street  
Newburyport, MA 01950

## Program Registration

Our weekend programs are designed to be fun but safety is our primary concern. This program is NOT intended to be an introduction to kayaking. Participants should have more than just cursory experience paddling flatwater. They should be able to get in and out of a kayak without assistance, launch and land a kayak from shore, perform a wet exit, and should feel comfortable/confident to do what is listed in the "Necessary Skills" section of the "Detailed Description" of Introduction to Sea Kayaking posted at: ["https://amckbc.org/weekend-programs](https://amckbc.org/weekend-programs)



others. Some, but not all of these risks include: hazardous and unpredictable ground, water or weather conditions; misjudgments made by leaders, co-leaders, participants or others; travel in remote areas that can cause delays in transportation, evacuation and medical care; equipment that can fail or malfunction; the potential that the participant or others (e.g. coparticipant, driver, medical and rescue personnel) may act carelessly or recklessly. I understand that AMC cannot assure participant's safety or eliminate any of these risks. Participant is voluntarily participating with knowledge of the risks. Therefore, participant (and parent/s of minors) assume and accept full responsibility for the inherent and other risks (both known and unknown) of these activities, and for any injury, damage, death or other loss suffered by participant, resulting from those risks, and resulting from participant's negligence or other misconduct. By signing this agreement, I (participant and parent/s of a minor participant) acknowledge that I have read the COVID-19 warning above and understand the contagious nature of COVID-19. I voluntarily assume the risk that I may be exposed to or infected by COVID-19 by participating in AMC activities and using any of its facilities or equipment. I understand the risk of becoming exposed to or infected by COVID-19 during AMC activities may result from the actions, omissions, or negligence of myself and others, including, but not limited to, AMC volunteers, leaders, and staff. **RELEASE AND INDEMNITY AGREEMENT** Please read carefully. This Release and Indemnity agreement contains a surrender of certain legal rights. I (adult participant, or parent/s for themselves and for and on behalf of their participating minor child) agree as follows: (1) to release and agree not to initiate any litigation against AMC, with respect to any and all claims, liabilities, suits or expenses (including attorneys' fees and costs) (hereafter collectively 'claim' or 'claim/s') for any injury, damage, death or other loss in any way connected with my/my child's enrollment or participation in these activities, or use of AMC equipment, facilities or premises. I understand I agree here to waive all claim/s I or my child may have against AMC, and agree that neither I, my child, or anyone acting on my or my child's behalf, will initiate a claim against AMC, as a result of any injury, damage, death or other loss suffered by me or my child; (2) to defend and indemnify ('indemnify' meaning protect by reimbursement or payment) AMC with respect to any and all claim/s brought by or on behalf of me, my child, a family member, a co-participant, or any other person for any injury, damage, death or other loss in any way connected with my/my child's enrollment or participation in these activities or use of AMC equipment, facilities or premises. This Release and Indemnity Agreement includes claim/s resulting from AMC's negligence (but not its gross negligence or intentional or reckless misconduct), and includes claim/s for personal injury or wrongful death (including claim/s related to emergency or medical response, assessment or treatment), property damage, breach of contract or any other claim. I agree that the substantive laws of Massachusetts govern this Document and all other aspects of my relationship with AMC, and that any mediation, suit, or other proceeding must be filed or entered into only in Massachusetts. This Document is intended to be interpreted and enforced to the fullest extent allowed by RMT 10/2020 law. Any portion of this Document deemed unlawful or unenforceable shall not affect the remaining provisions, and those remaining provisions shall continue in full force and effect. Participant and parent/s of a minor participant agree: I have carefully read, understand and voluntarily sign this Document and acknowledge that it shall be effective and binding upon me, my minor children and other family members, and my heirs, executors, representatives and estate. One or both parent/s must sign below for any participating minor (those under 18 years of age).

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Participant Signature

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Participant Name (please print)

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Date

**Parent/Guardian Signature if Participant under 18**

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Parent/Guardian Signature

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Parent/Guardian Name (please print)

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Date