

Registration Form for Introduction to Sea Kayaking

AMC Knubble Bay Camp, September 18 - 20, 2026 (Arrive Friday Evening)

Program Cost: \$250 (AMC members), \$285 (non-members).

Before you register, you are required to read the detailed Introduction to Sea Kayaking description at: <https://amckbc.org/introduction-to-sea-kayaking> and assess that you have the necessary sea kayaking skills (see below).

- Before completing and mailing the registration form with payment, please email the program's registrar Gail Fensom (gailrond@comcast.net) to make sure the program still has openings.
- To reserve your spot, please print and complete the 2-page registration form (below) and mail it with your check made out Beal Island/KBC Committee. Please mail it to:

Gail Fensom
#7 67th Street
Newburyport, MA 01950

- The KBC Volunteer Committee would greatly appreciate it if you would please volunteer to assist with meal preparation (not cooking) & meal 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.
- Please be advised that the program will be held rain or shine.
- **No refunds can be made after September 3**

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 "Detained Description" of Introduction to Sea Kayaking posted at:

<https://amckbc.org/introduction-to-sea-kayaking>

----- CUT HERE & MAIL ALL PAGES TO THE REGISTRAR -----

Participant Name (please print) / / _____
Date of Birth Email Address

Address Phone Number

Emergency Contact Phone Number

Are you renting from Seaspray? _____ Is it OK for us to publish photos of you on our web page? _____

Do you have any dietary restrictions?
We will let you know if we will be able to accommodate your restrictions.

Please list any medical conditions that may impact your participation in this event. If medication is necessary, will you have access to it? Add additional pages if needed.
This information is confidential and shared only with the registrar and trip leaders.

RELEASE AND INDEMNITY AGREEMENT

RMT 10/2020 APPALACHIAN MOUNTAIN CLUB VOLUNTEER CAMPS & CABINS COVID-19 WARNING & ACKNOWLEDGMENT AND ASSUMPTION OF RISKS & RELEASE AND INDEMNITY AGREEMENT INTRODUCTION PLEASE CAREFULLY READ THIS DOCUMENT CAREFULLY BEFORE SIGNING. All participants must sign this Document.

In consideration of the services of the Appalachian Mountain Club, Inc., a charitable, not-for-profit corporation, organized and existing under the laws of Massachusetts, and its chapters, including all officers, employees, representatives, agents, independent contractors, volunteers (including leaders and co-leaders), members and all other persons or entities associated with it (collectively referred to in this Document as 'AMC'), I (participant and parent/s of a minor participant), acknowledge and agree as follows:

ACKNOWLEDGMENT AND ASSUMPTION OF RISKS Use of AMC Volunteer-led Camps and Cabins and/or instructional, educational and/or adventure activities (which may be scheduled or unscheduled, supervised or unsupervised and/or occur during free or independent time) occur in a variety of locations in the U.S. and include the 'August Camp' program. Activities may include, but are not limited to hiking, biking, skiing, swimming, maintenance of trails and facilities, canoeing, kayaking, sailing, participant's independent use of AMC cabins or other facilities or use of those facilities in connection with AMC organized trips or activities, and transportation or travel to and from AMC facilities or activities (referred to in this Document as 'activities' or 'these activities'). In all activities, participants share in the responsibility for their own safety. Participants (and parent/s of minors) take responsibility for having appropriate skills, physical conditioning, equipment and supplies for these activities. These activities include inherent and other risks, hazards and dangers (referred to in this Document as 'risks') that can cause or lead to injury, property damage, illness, mental or emotional trauma, paralysis, disability or death to participant or 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.

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).

Participant Signature

Participant Name (please print)

Date

Parent/Guardian Signature if Participant under 18

Parent/Guardian Signature

Parent/Guardian Name (please print)

Date